

St 295
1.1950
copy 2

**One Hundred And Twenty-Seventh
ANNUAL REPORT**

of the

**South Carolina State
Hospital**

FOR THE YEAR ENDING JUNE 30, 1950



S. C. STATE LIBRARY

MAR 21 2006

STATE DOCUMENTS

Printed Under the Direction of the
State Budget and Control Board

One Hundred And Twenty-Seventh ANNUAL REPORT

of the

South Carolina State Hospital

FOR THE YEAR ENDING JUNE 30, 1950



Printed Under the Direction of the
State Budget and Control Board

SOUTH CAROLINA STATE HOSPITAL

BOARD OF REGENTS

GEORGE A. BUCHANAN, JR., Chairman.....	Columbia
MRS. Wm. R. WALLACE.....	Chester
OLIN B. CHAMBERLAIN, M.D.....	Charleston
WILSON W. HARRIS.....	Clinton
C. M. TUCKER, JR.....	Pageland

MEDICAL STAFF

Full Time

CLEVE C. ODOM, M.D.
Superintendent
State Mental Health Authority

W. P. BECKMAN, M.D.
Clinical Director

EDW. M. BURN, M.D.
GLENN B. CARRIGAN, M.D.
JOE E. FREED, M.D.
Wm. S. HALL, M.D.
E. W. LONG, M.D.
Wm. G. MOREHOUSE, M.D.
GORDON R. WESTROPE, M.D.
Senior Assistant Physicians, Columbia Division

H. A. McELROY, M.D.
SOL. B. McLENDON, M.D.
Senior Assistant Physicians, State Park Division

LAWSON H. BOWLING, M.D.
JOHN S. SCOTT, M.D.
Assistant Physicians, State Park Division

MEDICAL STAFF

Part Time

GEORGE BENET, M.D.
Surgeon

JOHN E. HOLLER, M.D.
Tuberculosis

GEORGE R. LAUB, M.D.
Eye, Ear, Nose and Throat

CHAS. J. LEMMON, JR., M. D.
Neurosurgeon

AUSTIN T. MOORE, M.D.
Orthopedic Surgeon

THOS. A. PITTS, M.D.
Roentgenologist

J. W. VARNER, M.D.
Urologist

ROLAND S. PIKE, D.S.S.
Dentist

D. J. RUFF
Pharmacist

MEDICAL AUXILIARY SERVICE

HOWARD W. PASCHAL
Chief Clinical Laboratory Technician

HARRY C. ALLISON
Chief X-ray Technician

ETHEL SHARPE
Chief Social Service

LILLIAN B. McINTOSH
Director Occupational Therapy

ELLA B. AIKEN
Librarian

FRANCES C. SHIMMEL
Director Recreational Therapy

NURSING DIVISION

BEULAH L. GARDNER, R.N.
Director of Nurses

MARTHA MOORE BRADLEY, R.N.
Director Nursing Education

CHAPLAINS

REV. J. OBERT KEMPSON
Columbia Division

REV. ROBERT H. WILSON
State Park Division

ADMINISTRATIVE DIVISION

LAUREN W. SHELLEY
Business Manager

THOS. F. STEVENSON, SR.
Treasurer

JOHN W. WHITEHOUSE
Personnel Officer

MEDICAL SUPERINTENDENTS

1. JOHN WARING PARKER, M. D.
January 1, 1837-1870
Recalled as assistant physician 1876
Remained until death October 11, 1882
2. JOSHUA FULTON ENSOR, M. D.
August 5, 1870-December 31, 1877
3. PETER E. GRIFFIN, M. D.
January 1, 1878-May 1891
4. JAMES WOODS BABCOCK, M. D.
August 1, 1891-March 14, 1914
5. T. J. STRAIT, M. D.
March 17, 1914-May 1, 1915
6. CHARLES FREDERICK WILLIAMS, M. D.
May 1, 1915-May 1, 1945
7. COYT HAM, M. D.
May 1, 1945-January 1, 1949
8. WM. PETER BECKMAN, M. D., Acting Superintendent
January 1, 1949-October 1, 1949
9. CLEVE C. ODOM, M. D.
October 1, 1949-

REPORT OF THE REGENTS

Columbia, S. C., July 1, 1950.

To His Excellency, J. Strom Thurmond, Governor of South Carolina:

The Board of Regents of the South Carolina State Hospital submits to you and the General Assembly for the fiscal year 1949-1950 the one hundred and twenty-seventh annual report.

APPOINTMENT OF SUPERINTENDENT

Dr. Cleve C. Odom was appointed superintendent effective October 1, 1949, following a period of nine months in which Dr. William P. Beckman served in the dual capacity of both clinical director and acting superintendent.

The great immediate need of the S. C. State Hospital is improved administration, for out of improvements in administration, assuring the wise expenditure of the monies available, can come, over the years, the satisfaction of the other pressing needs of the institution. But first its operation must be put on a sound business basis.

In Dr. Odom as superintendent, Dr. Beckman as clinical director and Mr. Lauren W. Shelley as business manager, the Board feels that it has now an administrative team that can continue and enlarge upon the good work in this direction already begun. Dr. Odom is an experienced mental hospital administrator with a nation-wide reputation and nation-wide connections. During the war he set up and headed Mason General Hospital, the Army's largest mental institution, and won the praise of both civilians and military personnel for his sound handling of the affairs of the hospital and for his encouragement of the adoption of new techniques in the care and treatment of mental cases assigned to his care. Since the closing of Mason General Hospital and the discharge or transfer of its last patients, Dr. Odom, following his retirement from the Army, has been the head of the Veterans' Administration mental hospital at Augusta, Ga. At Mason General all of the young Army psychiatrists were trained and the S. C. State Hospital is hopeful that if its salary schedule can be increased that Dr. Odom's acquaintance with these psychiatrists may enable us to build up the medical staff to a figure more nearly in accord with realities. Morale of both employees and patients is on the upgrade. Various improvements and innovations, most of them improvised, have already been put into effect. With sufficient money, provided by the State, the S. C. State Hospital can become again the institution which it ought to be and in which the State may take pride.

PROBLEMS OF ADMINISTRATION

The shortage of professional and attendant personnel, as reported last year, remains critical. Personnel in other departments is also inadequate, with a resulting material effect on operating efficiency. A reduced work week and increased compensation for employees still appear as the only solution.

Numerous and varied inequities exist in salaries and wages for jobs in the same classification and particularly between the Columbia and State Park Divisions. Continuous efforts are being made to eliminate these inequalities and thus make for improved morale.

BUSINESS DEPARTMENT

An accompanying report of the superintendent reflects activities generally in the business department. While satisfactory progress is being made in organization and operations, both inadequate personnel and insufficient funds make it impossible to overcome the tremendous need for repairs to the physical plant, both buildings and equipment. It has not yet been possible to extend the sprinkler system and thus reduce to some degree the danger from fire.

NEEDED PERMANENT IMPROVEMENTS

The physical condition of the S. C. State Hospital plant is appalling, despite considerable improvement. Years of maintenance neglect have aggravated conditions and converted minor repair needs into a major reconstruction job. The hospital is overcrowded and undermanned.

While needed permanent improvements for the hospital are many, those of an emergency nature include the following:

Enlargement and renovation of kitchen at Columbia.

Ward building replacement for disturbed mentally ill at Columbia, 300 beds.

Ward building at Columbia for female patients, 250 beds.

Ward building at Columbia for male patients, 250 beds.

Extension of sprinkler system in buildings not classified as fire resistant.

Respectfully submitted

G. A. BUCHANAN, JR., Charman

MRS. Wm. R. WALLACE

OLIN B. CHAMBERLAIN, M.D.

W. W. HARRIS

C. M. TUCKER, JR.

Board of Regents

South Carolina State Hospital

SUPERINTENDENT'S REPORT

Columbia, S. C., July 1, 1950.

To The Board of Regents of The South Carolina State Hospital.
Gentlemen:

The superintendent has the honor to submit the following report of the activities of the South Carolina State Hospital for the year ending June 30, 1950.

MOVEMENT OF PATIENT POPULATION

At the beginning of the year 1949 the names of 6308 patients, 3092 males and 3216 females, were on the current register of the hospital.

During the year 2065 patients, 1163 males and 902 females were admitted, which was an increase of 172 over the year 1948-1949. Of the admissions, 1623 patients, 933 males and 690 females were first admissions. The readmissions numbered 442 patients, 230 males and 212 females.

There were 56 voluntary admissions during the year. A provision for voluntary admission to the hospital is ideal. However, for obvious reasons, voluntary admissions to this hospital have proven unsatisfactory in most instances, both for the patient and for the medical staff. Because of the overcrowding and the lack of facilities to provide special or separate wards, the voluntary patients must be cared for in areas of the hospital where there are patients more mentally ill than they. The ward environment is not what they had anticipated. Many become dissatisfied and after a few days submit the required ten-day notice of intended departure and leave the hospital ten days from the date of notice. The patient has been helped but little, if any, and the doctor feels that he could have devoted his time more beneficially to the mentally ill patient who could not leave the hospital at will.

At the end of the year there were 6468 patients on the hospital register, 5326 were in the hospital; 1142 or over 17% were on trial visit or otherwise absent.

During the year the names of 1905 patients were discharged from the hospital rolls. Of these discharges, 1462 were by reason of termination of commitment, and 443 by reason of death.

Of the 1462 patients returned to the community, 30 were re-ordered as recovered; 967 as improved; 87 as unimproved; and 378

were recorded as without psychosis. Included in the last number were the patients suffering from alcoholism and drug addiction. A satisfactory evaluation of a patient's mental condition at the time of discharge presents a difficult problem. Patients who are hospitalized because of a psychosis leave the hospital on trial visit when sufficiently improved. They are discharged from the hospital when they have remained on trial visit status for one year. The general condition of the patients at the time they go on trial visit is recorded as the condition at the time of discharge.

DEATHS

Of the 443 deaths, 140 were white males and 113 were Negro males; 105 were white females and 85 were Negro females. Cardio vascular disease was the leading cause of death.

COURT CASES

Charged with the commission of various offenses, 76 persons were admitted to the hospital by Order of the Court for a 30 day period of observation to determine the presence or absence of a mental illness.

The medical staff, in compliance with Court Orders, examined in the S. C. State Penitentiary 22 persons who were inmates.

From various State institutions 17 persons were sent to the hospital by the Order of the Governor for psychiatric examination.

MEDICAL SERVICE

On July 1, 1949 there were on duty 7 part time physicians and 13 full time physicians (psychiatrists), 28 registered nurses, and 322 attendants. The ratio of full time physicians (12) to patients was 1 to 425; the ratio of registered nurses available for ward duty (18) was 1 to 283 patients; and the ratio of attendants (322) was 1 to 16. All which indicated a critical shortage of medical service personnel.

The marked overcrowding of all the wards and the deteriorated state of many of the ward buildings added to the difficulties of rendering high quality care and treatment to patients. The critical personnel shortage, the marked overcrowding of all

wards and the deteriorated state of many of the buildings were compensated for in a large measure by the excellent spirit of all the personnel, administrative, clerical and medical, who had to do with the care and treatment of the patients, with the result that, in face of marked difficulties, patients did receive high quality care and treatment.

The entire staff of the United States Public Health Service Laboratory of Tropical Diseases has given much valuable aid to the medical staff, especially in the study and treatment of disorders associated with intestinal parasitic infestations and in the treatment of neurosyphilis with malaria.

Electro shock treatment was given to 939 patients.

During the year 40 patients had a transorbital leukotomy.

Numerous groups from elementary schools, high schools and colleges have been escorted on tours through parts of the hospital during the year. Special clinics have been held for psychology students.

MEDICAL STAFF DATA

Dr. Newton F. Garland, who had been a member of the hospital staff since April 15, 1948, resigned July 1, 1949 to accept a residency in the Columbia Hospital, Columbia, S. C.

Dr. Lawson H. Bowling, a graduate of Wofford College, and of the Medical College of the State of South Carolina, 1948, joined the staff as an assistant physician July 11, 1949, after having served a rotating internship in the McLeod Infirmary, Florence, S. C.

Dr. John S. Scott, a graduate of the University of London, 1947, joined the hospital staff on July 16, 1949. He had completed one year of rotating internship and had spent five months on the medical and neuropsychiatric service in Roper Hospital, Charleston, S. C., just prior to the S. C. State Hospital service.

Dr. J. C. Brabham, a member of the staff since August 1, 1944, resigned April 1, 1950 to accept a position with the South Carolina State Board of Health.

Messrs. Harry Parker Jones, H. F. Wm. Mohrmann, Hugh H. DuBose, Wm. John Henry and Robert L. Lumpkin, students, Medical College, State of South Carolina, served as clinical clerks in the hospital during their summer vacation.

From September 26, 1949 through May 1950 two senior students from the Medical College, State of South Carolina, were assigned each week to the hospital for clinical training in psychiatry.

A joint meeting of the Southeastern Society of Neurology and Psychiatry and the Columbia Medical Society was held at the hospital on August 8, 1949. Dr. Wm. G. Morehouse, a member of the hospital staff, presented a paper entitled, "Involuntional Melancholia", which was discussed by Dr. Edw. M. Burn, staff member, and Dr. Ben N. Miller, internist, Columbia.

GENERAL STATISTICS

July 1, 1949 through June 30, 1950

	White Men	White Women	Negro Men	Negro Women	Total
Patients on books of hospital beginning of hospital year....	1,712	1,882	1,380	1,334	6,308
Admissions during twelve months:					
First admissions.....	585	461	348	229	1,623
Re-admissions	186	156	44	56	442
Total received.....	771	617	392	285	2,065
Total on books during twelve months:.....	2,483	2,499	1,772	1,619	8,373
Discharged from books during twelve months:.....	614	488	187	173	1,462
Recovered	12	7	8	3	30
Improved	298	392	130	147	967
Unimproved	44	26	3	14	87
Without psychosis.....	260	63	46	9	378
Died during twelve months.....	140	105	113	85	443
Total discharged and died.....	754	593	300	258	1,905
Patients remaining on books of hospital at end of hospital year:					
In hospital.....	1,370	1,479	1,282	1,195	5,326
On trial visit or otherwise absent.....	359	427	190	166	1,142
Total	1,729	1,906	1,472	1,361	6,468
Daily average in hospital.....	1,343	1,466	1,255	1,153	5,217

COURT CASES

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Cerebral arteriosclerosis.....	2	..	1	..	3
Convulsive disorder, epileptic deterioration.....	..	..	1	1	2
Dementia praecox, catatonic.....	3	..	4	1	8
Manic depressive:					
Manic	1	..	..	..	1
Mixed	1	..	..	..	1
Mental deficiency.....	1	..	..	..	1
Paranoia and paranoid condition.....	..	1	..	..	1
Syphilitic meningo encephalitis.....	2	..	..	..	2
Total with psychoses.....	10	1	6	2	19
Without Psychoses:					
Alcoholism	3	..	..	..	3
Mental deficiency.....	4	..	2	..	6
Other non-psychotic disease and condition—					
Schizoid personality.....	..	..	1	..	1
Psychopathic personality.....	12	..	1	..	13
Without mental disorder.....	26	1	7	..	34
Total without psychoses.....	45	1	11	..	57
GRAND TOTAL.....	55	2	17	2	76

COMMITTED BY ORDER OF GOVERNOR

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Dementia praecox, catatonic.....	..	..	1	..	1
Due to convulsive disorder, epilepsy—clouded states.....	..	..	2	..	2
Mental deficiency.....	1	..	..	..	1
Psychopathic personality.....	1	..	..	..	1
Total with psychoses.....	2	..	3	..	5
Without Psychoses:					
Convulsive disorder, epilepsy.....	2	..	1	..	3
Mental deficiency.....	1	2	3	..	6
Psychopathic personality.....	1	..	..	..	1
Without mental disorder.....	2	..	..	..	2
Total without psychoses.....	6	2	4	..	12
GRAND TOTAL.....	8	2	7	..	17

SPECIAL EXAMINATIONS AT THE SOUTH CAROLINA
STATE PENITENTIARY

Of the 22 inmates examined at the South Carolina State Penitentiary, 20 were found to be without psychosis, and 2 were diagnosed as without psychosis, psychopathic personality.

SURGICAL SERVICE

Operations performed by the consulting and resident staff are found in the following tables:

	Patients						Employees					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Appendectomy	1	1	..	1	3		1	..	..	..	1	
Aspiration and drainage abscess:												
Back .....	..	1	..	..	1		..	..	..	..	..
Chest	4	..	..	..	4		..	..	..	..	..
Head .....	..	..	1	..	1		..	..	..	..	..
Pleural cavity.....	1	1	..	1	3		..	..	..	..	..
Biopsy, growth:												
Chest	1	..	..	..	1		..	..	..	..	..
Neck .....	..	..	1	..	1		..	..	..	..	..
Nose .....	..	..	1	..	1		..	..	..	..	..
Blood transfusion.....	5	6	..	..	11		2	..	..	..	2	
Cauterization, cervix.....	..	..	..	..	..		..	1	..	..	1	
Cholecystotomy .....	..	1	..	..	1		..	1	..	..	1	
Circumcision .....	..	..	..	..	..		1	..	..	..	1	
Crainotomy .....	..	1	..	..	1		..	..	..	..	..
Dilatation and curettage.....	..	2	..	..	2		..	4	..	..	4	
Excision, lipoma, hand.....	..	..	..	..	..		..	..	..	1	1	
Exploratory laparotomy.....	..	1	..	..	1		..	..	..	..	..
Hemorrhoidectomy .....	..	2	..	2	2		1	..	..	..	1	
Herniotomy	4	1	..	..	5		3	..	2	..	5	
Hysterectomy .....	..	1	..	..	1		..	1	..	..	1	
Incision and drainage abscess:												
Back	1	1	..	..	2		..	..	..	..	..
Rectum	1	..	..	..	1		..	..	..	..	..
Thigh	1	..	..	..	1		..	..	..	..	..
Incision and removal growth:												
Nose	1	..	..	..	1		..	..	..	..	..
Tongue .....	..	1	..	..	1		..	..	..	..	..
Incision and removal sebaceous cyst:												
Back	2	..	..	..	2		..	..	..	..	..
Breast .....	..	1	..	..	1		..	..	..	..	..
Elbow .....	..	1	..	..	1		1	..	..	..	1	
Face .....	..	1	..	..	1		..	..	..	..	..
Hand	1	..	..	..	1		..	..	..	..	..
Thigh .....	..	..	..	..	..		..	1	..	..	1	
Incision and removal tumor:												
Cheek .....	..	1	..	..	1		..	..	..	..	..
Leg .....	..	2	..	..	2		..	..	..	..	..
Ligation tubes, sterilization.....	..	..	..	2	2		..	..	..	..	..
Ligation varicose veins.....	..	7	..	..	7		2	1	..	..	3	
Mastectomy .....	..	2	..	..	2		..	..	..	..	..
Oophorectomy .....	..	1	..	..	1		..	..	..	..	..
Prefrontal leukotomy .....	..	17	..	..	17		..	..	..	..	..
Phrenectomy .....	..	1	..	..	1		..	..	..	..	..
Repair, cystocele and suspension of uterus .....	..	..	..	..	..		..	1	..	..	1	
Skin grafting, papiloma, hand.....	..	..	..	..	..		1	..	..	..	1	
Supra-pubic cystolithectomy.....	..	1	..	..	1		..	..	..	..	..
Suturing, laceration, tongue.....	..	..	..	..	..		1	..	..	..	1	
Transorbital leukotomy.....	5	22	3	10	40		..	..	..	..	..
Trephine .....	..	..	..	1	1		..	..	..	..	..
Transurethral resection.....	1	..	..	..	1		..	..	..	..	..
Total.....	29	77	6	15	127		13	10	2	1	26	

ORTHOPEDIC SERVICE

	PATIENTS					EMPLOYEES			
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Total	
Amputation:									
Finger .....	..	..	1	..	1	..	..	..
Leg	4	3	5	2	14	..	..	..
Toe .....	..	..	1	..	1	..	..	..
Thumb .....	..	..	1	..	1	..	..	..
Application elastic bandage, fracture, ribs...	1	..	..	..	1	..	..	..
Closed reduction and application of cast for fracture:									
Ankle	2	..	1	..	3	1	..	1	
Fingers and hand.....	1	..	..	..	1	..	..	..
Fibula .....	..	1	..	..	1	..	..	..
Hip .....	..	12	..	..	2	..	..	..
Humerus	2	2	..	..	4	..	..	..
Phalanx, hand.....	1	..	..	..	1	..	..	..
Shoulder .....	..	1	..	..	1	..	..	..
Vertebra	2	..	..	..	2	..	..	..
Wrist	5	15	..	3	23	..	..	..
Fusion, vertebra:									
Back	1	..	..	..	1	..	..	..
Radius .....	..	..	..	1	1	..	..	..
Incision for osteomyelitis, tibia.....	1	..	..	..	1	..	..	..
Incision:									
Removal, 1st digital phalanx, infection, hand	1	..	..	..	1	..	..	..
Removal pins, hip.....	1	2	..	..	3	..	..	..
Open reduction for fracture:									
Ankle	2	..	..	1	3	..	..	..
Cartilage, knee.....	..	1	..	..	1	..	1	1
Elbow .....	..	2	..	..	2	..	..	..
Hip	6	10	..	..	16	..	..	..
Humerus .....	..	..	..	1	1	..	..	..
Shoulder .....	..	1	..	1	2	..	..	..
Open reduction and blade plate fixation for fracture:									
Hip .....	..	3	..	..	3	..	..	..
Tibia .....	..	..	1	..	1	..	..	..
Open reduction and steel pin fixation for fracture:									
Hip	4	9	..	..	13	..	..	..
Open reduction and nail fixation for fracture:									
Hip	2	2	..	..	4	..	..	..
Removal:									
Finger nail.....	..	1	..	..	1	..	..	..
Toe nail.....	..	..	..	..	..	1	..	1
Total.....	37	56	14	9	116	2	1	3	

SPECIAL TREATMENTS

	PATIENTS White Women	TREATMENTS	EMPLOYEES White Women	TREATMENTS
Ultra violet for				
Ring worm, head.....	1	10	..	..
Diathermy for				
Knee and thigh.....	1	4	..	..
Removal, wart, finger.....	..	..	1	1
Total.....	2	14	1	1

TREATMENT OF SYPHILIS AND NEUROSYPHILIS

DOSES	White Men	White Women	Negro Men	Negro Women	Total
Aldarsone .....	....	94	....	....	94
Bismarsen .....	....	....	....	116	116
Bismuth sodium tartrate.....	361	....	....	547	908
Bismuth subsolycylate.....	....	....	81	....	81
Malaria	40	12	56	11	119
Mapharsen	289	....	1,672	586	2,547
Thio bismol.....	42	118	855	....	1,015
Tryparsamide	164	....	....	....	164
Stabisol .....	....	....	....	25	25
Total.....	896	224	2,664	1,285	5,069

UROLOGICAL SERVICE

	Patients					Employees
	White Men	White Women	Negro Men	Negro Women	Total	
Cystoscopic examinations.....	5	10	..	..	15	..

SYPHILITIC MENINGO-ENCEPHALITIS

	White Men	White Women	Negro Men	Negro Women	Total
Remission	1	5	..	..	6
Much improved.....	..	..	13	3	16
Improved	9	..	7	2	18
Unimproved	9	3	6	3	21
Died .....	..	1	5	1	7
Total.....	19	9	31	9	68

ELECTRO-SHOCK THERAPY

	White Men	White Women	Negro Men	Negro Women	Total
Markedly improved.....	19	25	11	14	69
Improved	161	211	93	165	630
Unimproved	45	73	27	95	240
Total.....	225	309	131	274	939

EYE, EAR, NOSE AND THROAT DEPARTMENT

	PATIENTS					EMPLOYEES				
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total
EYES:										
Corneal ulcer.....	2	10	6	2	20	..	..	2	..	2
External diseases.....	26	22	5	4	57	6	12	9	9	36
Eye ground examinations.....	728	533	427	373	2,061	1	1	1	2	5
Foreign bodies removed.....	..	3	..	..	3	2	2	..	..	5
Glaucoma .....	..	1	1	..	2	..	..	1	..	1
Incision and removal cyst.....	..	1	..	..	1	..	..	..	..	..
Injuries	2	2	..	1	5	9	2	2	1	14
Keratitis uveitis.....	4	9	3	1	17	3	1	4	..	8
Pterygium .....	..	1	..	..	1	..	..	..	..	..
Refractions, cycloplegic.....	39	50	1	1	91	16	20	11	9	56
Refractions, simple.....	72	69	..	..	141	10	25	7	8	50
Removal, sutures.....	..	..	1	..	1	..	..	..	..	..
Routine inspections.....	50	63	..	..	113	..	2	4	7	13
Slit lamp examination.....	8	11	2	..	23	2	4	2	1	9
Styes lanced.....	1	..	..	..	1	..	..	..	..	..
Total.....	932	775	446	384	2,537	50	69	43	45	207
EARS:										
Cerumen removed.....	3	6	..	..	9	2	..	..	..	2
Injuries	1	1	..	..	2	2	..	..	..	4
Irrigations	2	4	..	..	6	..	..	..	..	2
Otitis externa.....	4	3	1	..	8	12	10	5	2	29
Otitis media.....	51	26	3	1	81	12	29	..	1	42
Removal, wart.....	..	..	..	..	..	..	..	2	..	2
Routine examinations.....	643	458	20	10	1,131	..	..	7	11	18
Total.....	704	498	24	11	1,237	35	39	14	15	103
NOSE AND THROAT:										
Foreign bodies removed.....	..	1	..	..	1	..	..	..	..	..
Injuries	2	..	..	..	2	..	..	..	..	..
Laryngitis .....	..	..	..	..	..	..	..	..	2	2
Naso-pharyngitis	5	3	..	..	8	3	3	..	..	6
Routine examinations.....	520	411	20	10	961	..	..	7	11	18
Shrinkage, congested nasal mucosa.....	..	..	..	..	..	2	3	..	2	7
Sinusitis	16	12	..	..	28	19	21	12	6	58
Tonsillitis	11	10	1	3	25	13	28	13	8	62
Tonsillectomies	2	..	..	2	4	..	2	1	..	3
Tracheotomy	1	..	..	..	1	..	..	..	..	..
Total.....	557	437	21	15	1,030	37	57	33	29	156

DENTAL WORK

Examinations	4,032
Anesthetics	2,223
Extractions	2,198
Treatments	306

Bridges:

Removed	8
Repaired	2
Reset	1

Dentures:

Made	55
Partial made	7
Partial repaired	4
Repaired	22

Fillings:

Alloy	189
Kadon	39
Porcelain	49
Temporary	2

Gold Crowns:

Made	1
Removed	2
Reset	1

Gold Inlays:

Made	3
Reset	3

Porcelain Jacket Crowns:

Made	1
Fractured mandible reduced	1
Tooth brushes distributed	1,044
X-ray exposures	114

LABORATORY SERVICE

Although the work done in the laboratory during the first nine months of the year was similar to that which had been done during the preceding year, several important changes were made during the latter part of the year in an effort to improve the laboratory and provide more valuable service to the doctors.

To accomplish these changes, it was deemed advisable to place the laboratory and X-ray departments under separate heads. This plan became effective April 1, 1950 when Mr. Howard W. Paschal reported for duty as Chief Medical Technician and Mr. Harry C. Allison was made Chief X-ray Technician.

With the help of the Engineering Division, new equipment was constructed to facilitate the performance of certain procedures. This equipment consisted of drying boards for glassware and stained slides, drawer sections and a sectioned box for ward reports. The laboratory was painted and the autoclave moved to a new location so that a sterilization room could be established. A new drying oven and new glassware were purchased; syringe covers were made so that blood could be drawn under aseptic conditions by the laboratory personnel. Request slips for each section of the laboratory were designed, printed and distributed to each ward.

The following new tests were employed: Hematocrit and Sedimentation Rates to replace routine Erythrocyte Counts, Fractional Proteins on spinal fluid and blood and various Liver and Kidney Function Tests such as Cephalin Flocculations, Bromsulphaleins, Non-Protein Nitrogens and Creatinines. Many patients on each service were typed and the Rh factor determined to provide a blood donor file for more efficient transfusion service. The VDRL, latest diagnostic test for syphilis, was begun after Mrs. Mary Hastings had spent two weeks of schooling under Dr. Harry Wilson's supervision at the South Carolina State Board of Health. A complete laboratory medical examination consisting of a complete blood count, urinalysis, stool and serological examination was begun on every new admission to the hospital. This examination is comparable to those given by the laboratory in a general hospital.

Every six months, a serological examination for syphilis was planned on all food handlers. Cooking and eating utensils were checked at intervals and a weekly examination on milk products

was made to ascertain the Butter Fat Content and Bacteria Count.

In addition to these changes, lectures and demonstrations on new laboratory methods and procedures were given by Mr. Paschal to better equip the technicians for their work in the laboratory.

Total Examinations.....	16,650
Bacteriology	275
Cultures	26
Smears	240
Animal Inoculations.....	5
Bacteria counts (Milk).....	4
Chemistry	3,057
Glucose	1,130
Urea Nitrogen.....	303
Bromides	1,341
Icterus Index.....	50
Van den Bergh.....	2
Total Protein (Blood).....	11
Total Protein (Spinal Fluid).....	165
Chloride	2
PSP	3
Calcium	3
Cholesterol	6
Creatinine	2
Butter Fat.....	5
Non-Protein Nitrogen.....	31
Gastric Analysis.....	3
Hematology	4,758
R.B.C.	406
W.B.C. (Blood)	1,020
W.B.C. (Spinal Fluid).....	194
Hgb.	1,023
Sedimentation Rate	621
Malaria smears	4
Bleeding Time.....	16
Coagulation Time.....	29
Differential Counts	840
Hematocrit	601
Bone Marrow.....	4

Parasitology	60
Blood (Feces).....	9
Ova and Parasites.....	51
Urinalysis	2,894
Complete (Color, reaction, Sp. gr., Alb. Sug., Micro.)	2,844
Acetone	50
Serology	5,606
Flocculation (Blood).....	2,991
Flocculation (Spinal Fluid).....	697
Complement fixation (Blood).....	444
Complement fixation (Spinal Fluid).....	720
Colloidal Gold.....	588
Type and Rh.....	114
Cross match.....	52
Grand Total.....	16,650

X-RAY LABORATORY

X-ray exposures.....	4,010
Superficial therapy treatments.....	29
Basal metabolism rates.....	17
Electroencephalograph:	
White men.....	9
White women.....	9
	— 18
Electrocardiograms	66

DEPARTMENT OF NURSING EDUCATION

Current nursing trends emphasize student affiliation as a method of teaching psychiatric nursing. More and more States are now making psychiatric nursing a requirement in the basic curriculum. Each State should develop its resources to provide the affiliations necessary for the students of that State.

However, South Carolina had no provision for such affiliation and the training schools experienced difficulty in arranging with the psychiatric hospitals in nearby States for the required training of their students in psychiatric nursing.

The need for an affiliate training program at the South Carolina State Hospital was urgent. Plans were formulated to meet the demand.

Miss Martha Moore Bradley, R. N., a native of Due West, S. C., who had had extensive experience in psychiatric nursing in the Army and in civilian hospitals, and who had received a Master's Degree in psychiatric nursing education from Columbia University, and who was the director of a training program in the Veterans Administration Hospital, Augusta, Georgia, was employed by the South Carolina State Hospital on January 16, 1950 as director of nursing education. More definite preparations for a psychiatric nursing affiliation began in January 1950.

In order to acquaint the directors of our schools of nursing with the proposed program, their supervisors, head nurses—in brief, all nursing personnel participating in student education—were invited to the S. C. State Hospital for a three-day seminar, April 6-8, 13-15, 1950. It was necessary to hold two seminars in order that no hospital would be stripped of its entire key personnel at one time. These meetings were well attended, and the future student course was outlined.

At each seminar a nurse of National prominence addressed those in attendance. Our first speaker was Mrs. Laura Fitzsimmons, Director of Nurses at Lenwood Veterans' Hospital, Augusta, Georgia; for the second seminar, Miss Edith Haydon, Director of Nurses at St. Elizabeth's Hospital in Washington, D. C., and co-author of the textbook used in our current course.

In addition to the addresses by the guest speakers, our visitors spent three busy days receiving a preview of the three months' course planned for their student nurses. They were shown films illustrating mental mechanisms, taken on tours of the hospital in order to observe patients, treatments and special therapies; they participated in group discussions and heard talks by several of our State Hospital psychiatrists.

On June 1, 1950, twenty seven student nurses from seven South Carolina hospitals arrived at the S. C. State Hospital to enter the initial class for twelve weeks of psychiatric nursing.

Due to the fact that this new affiliation was being instituted, the Board of Regents found it necessary to close the basic school. Because of our limited personnel it was impossible to maintain two major projects in the field of nursing education. Accordingly, the basic school was closed October 6, 1950.

The last class to graduate from the South Carolina State Hospital School of Nursing received diplomas on June 2, 1950, for completion of two years training here and one year's affiliation at Roper Hospital in Charleston. The graduates were Misses Dorothy Allison Gibney of Florence, S. C.; Mildred D. Musgrave of Weston, West Virginia; and Miss Lois E. Robbins of Bath, S. C.

Seven student nurses were transferred to Roper Hospital for completion of training.

PSYCHIATRIC SOCIAL SERVICE

The Social Service Department was instituted in the South Carolina State Hospital on January 1, 1922 with one worker. The admissions that first year were 841 patients. Today there are three workers on the staff, and the admissions for the past fiscal year were 2065.

The duties of the social worker can best be described under the following headings: histories, pre-trial visit investigations, follow-up on patients on trial visit, work with patients in the hospital, interviewing relatives who visit the hospital, and educational work with lay groups.

Histories: The social worker is often requested by the staff to secure additional information on patients to aid in making a diagnosis. It is necessary for the social worker to visit the community and interview relatives, former employer, family physician and others who can give the family and personal history, and a detailed account of the onset of the patient's mental illness. Social histories are secured on all patients committed by the Court for observation. During the last year 76 histories were secured in this group.

Pre-Trial Visit Investigations: The social worker is often requested to visit the family before the patient is released to advise them as to the patient's condition and give them some understanding as to their attitude toward him and his recent illness.

Patients who have no relatives are often placed in homes as housekeeper or other suitable work is secured for them. It is necessary to investigate and pass on such placements.

Follow-up Visits: In a limited number of cases the social worker keeps in touch with patients on trial visit. This is an

important phase of the work which cannot be done adequately with the present number of social workers. The social worker under the direction of the psychiatrist advises the family in the after care of this group.

Patients and Relatives: During the past year one social worker has been on duty in the institution. It is her duty to interview new patients and answer questions in regard to the hospital, and clear up any confusion the patient may have.

She also secures history on the patient when brought in by relatives. She aids the doctors in seeing visitors, giving them information about the patient's condition, explains the regulations of the hospital and attempts to clear up any questions which concern them about the patient. This service has been most helpful in that it releases the doctors from this time consuming task and allow them more time on the wards.

The first month this service was instituted relatives of 101 patients were interviewed against 553 last month.

Educational Work: During the past year the social worker made talks on mental hygiene to Parent-Teacher Association groups and Mothers' Clubs. Lectures were also given each group of affiliate nurses who received training in the hospital.

The Social Service Department wishes to thank county and city officers, as well as social agencies over the State for their cooperation during the past year.

CHAPLAINS' SERVICE

During the past fiscal year the religious program has been expanded through the addition of personnel in the department. Rev. Robert H. Wilson became chaplain at the State Park Division on November 16, 1949 on a part time basis. On March 16, 1950 he assumed duties as full time chaplain. Two part time music directors were added to the staff of this department, one at each division of the hospital. Their duties are to direct the patient choirs and to be pianists for religious services. Also provisions were made for a part time chaplain in training at the Columbia Division.

Another group of theological students and ministers completed a program of clinical pastoral training on August 26, 1949. The program covered twelve weeks of intensive work and study. The

course is being sponsored jointly by the hospital and the Council for Clinical Training, Inc., New York City.

The keeping of activities records in this department was begun December 1, 1949. During this seven months period, 1001 interviews were held with new admission patients. The number of intensive interviews with patients was 246. Contacts were made with 215 relatives of patients. Visits with patients amounted to 2938. The seriously ill received 689 visits.

During this period 86 sermons were delivered and 198 devotional services on wards were conducted. The average attendance at all services on each Sunday was 691. An average of 86 patients compose the three choirs.

Pastors of the community have frequently visited the hospital. The churches of the Columbia vicinity have shown much interest in the patients and during the Christmas season they provided approximately 5800 Christmas gifts so that every patient could receive a present.

A group of approximately 60 patients presented a pageant of The Nativity during the Christmas season. Christmas carol services and other programs in keeping with the season were presented throughout the hospital. Special Christmas Day services were held. During the Thanksgiving and Easter seasons appropriate programs and services were held in the chapels and on the wards.

Chapel Building Fund

The fund for the proposed chapel at the Columbia Division, which was begun by patients in November 1943 with contributions since then from relatives, friends and organizations, is now \$25,611.61 which is still less than the required \$30,000.00 necessary to match a like amount appropriated by the 1946 General Assembly.

There is a definite need for a suitable place of worship at the Columbia Division and also for the patients at the State Park Division.

LIBRARY SERVICE

The library is organized in two divisions. The function of one is to make available to patients various types of library service. The other division is the medical library.

Patients' Library:

Library service is most beneficial to two groups of patients.

The first is composed of those who are well enough eventually to return to their homes and whose capacity for the enjoyment of reading or participation in other library activity has improved or needs stimulation. To these patients the library is a link with the outside community, and the use of its services may help them retain old knowledge or gain new ideas and wider interests.

The second group is made up of chronic patients whose intellectual endowment is relatively intact and whose reading skill and interests remain alert. Within the hospital environment these individuals make an adjustment that is impossible on the outside. Their discussion of books, current events and general topics affords them a great deal of satisfaction. The limited amount of library service of this type, which the librarian can at the present carry on, is sufficient to demonstrate the library service on this level helps these patients to retain their intellectual faculties, maintain their morale, and regain confidence in themselves, which factors have therapeutic value.

The patients' library consists of books purchased by the hospital, contributions of books and a revolving deposit from the State Library Board; also 14 magazine subscriptions given to the library, making it possible to have a few current magazines for circulation. During the year 335 books have been purchased and a monthly average of 379 patients borrowed reading material. The circulation for the period totaled 15,268.

Educational films and film strips were shown on six occasions to groups of patients.

Magazine racks have been placed on 14 wards and a total of 27,672 magazines sent regularly to 29 wards of the hospital.

A small room on one of the wards has been set aside as a reading room, and while it is lacking in adequate furnishings, the enthusiastic use of it by those on the ward indicates the need for such arrangements on a wider scale.

The Medical Library:

The number of medical and professional journals has been increased from 8 to 20 subscriptions and 28 books were added to the collection.

The library wishes to express appreciation to the State Library Board for its cooperation, and to the numerous individuals, churches and other groups for gifts of magazines and periodicals.

OCCUPATIONAL THERAPY

The present Occupational Therapy Department was activated in April 1950 with the employment of Mrs. Lillian B. McIntosh, a registered occupational therapist, who, prior to coming to the South Carolina State Hospital, had been employed for a number of years as an occupational therapist in the Veterans Administration Hospital, Augusta, Georgia.

Arrangements were made to locate the work shops in the Receiving Building of the hospital.

After a period of time an adequate amount of equipment was obtained and the department began to function.

The patients became interested in learning more about fancy needle work, and in making novelty jewelry, weaving rugs, doing brush and finger painting, doing leatherwork and engaging in all types of pottery work and other miscellaneous activities.

The value of such therapy is appreciated and plans are under way to provide more space and equipment so that more patients may participate in the work.

More trained personnel for the work is urgently needed. Registered occupational therapists are in the scarce category, therefore, it is planned to select eligible attendants for special short period training in handicrafts so that they may eventually become occupational therapy aides.

RECREATIONAL THERAPY

The recreational program of the South Carolina State Hospital was expanded and became more active under the direction of Mrs. Frances C. Shimmel who was employed on December 20, 1949.

Facilities, which were inadequate, were utilized to the best advantage. Volleyball courts were provided for both male and female patients. Basketball goals were erected at convenient places. Large numbers of patients participated in the volleyball and basketball activities. "Horseshoes" became a favorite pastime for the older and less active patients.

An athletic field on which either baseball or softball games could be played was provided. Softball in season was a popular sport with many patients, both as participants and spectators.

The affiliate nurses who were assigned weekly to the recreational department were a great help in getting more patients to participate in the program.

On June 1st a recreational aide was employed to assist with the recreational program during the summer months at the State Park division of the hospital.

The movie program was changed from one movie a week to two.

The weekly dance was always well attended in the large auditorium. An additional dance hour was arranged for the patients in the auditorium of the receiving building. A course of instruction in the basic steps of dancing was given to selected patients for a period of several weeks.

A combination program of bridge and other table games and square dancing was promoted weekly for the sewing room patients.

Music as a recreational feature was stressed. Eight table model radios were purchased to add to the number in the hospital. As many as possible of the seventeen pianos on hand were repaired, the remaining ones were salvaged. Recordings, classical and popular, were widely used and enjoyed. Group singing, musical quizzes, and other song fests were popular.

A patient orchestra was organized which furnished music for various occasions, and for luncheon in the male and female dining rooms twice a week.

Ward entertainment was planned with music, folk dancing, games and pool tournaments, whenever possible.

Among the great needs of the hospital are a recreational building at each division of the hospital, more recreational equipment, and more trained recreational personnel.

The accomplishments of the present recreational department indicate that "much can be done with little."

BUSINESS DEPARTMENT

Canteen Division

The canteen operation at Columbia progressed to the extent of providing broader service to patients and employees and yielding a reasonable profit. A new unit was established at the State Park division and housed in a temporary building. Although

earning a smaller profit, it has satisfactorily met a need which existed at that location.

Dietary Division

A mess officer was employed and placed in charge of the dietary service at both divisions of the hospital. Complete reorganization was effected, all jobs classified, and salary and wage scales established. Publication of a weekly menu was begun, portion controls established in the serving of food, and the services of a dietitian utilized to a greater extent. Surplus foods valued at approximately \$181,000 were obtained through the Production and Marketing Administration, thus making an improved diet possible. Only very limited progress was made toward improving facilities for preparation and distribution of food. This phase of the dietary operation continues to suffer in the absence of critically needed funds. One progressive step was the purchase and use of a bread slicing and wrapping machine

Engineering Division

Major repairs accomplished include new roofs on 11 ward buildings, two at Columbia and nine at State Park. Otherwise, repairs were limited to those which almost daily develop as emergencies and constitute more than normal maintenance. Permanent improvements completed at Columbia include a combination warehouse and refrigeration plant, steam heating systems for four ward buildings, a milk processing plant, and extension and surfacing of Gregg Street between Calhoun Street and Farrow Road. Those completed at State Park consist of an administration building, a receiving building, a farrowing house for the farm, and a telephone system. One ward building at this location was partially destroyed by fire.

Laundry machinery, a modern fire truck, and an ambulance constitute the major equipment acquired.

Farm Division

Dairy herds were transferred to South Carolina Penitentiary farms at Boykin. Those buildings vacated at State Park as the result of such transfer were converted into broiler houses, laying

houses, and a dressing plant. A poultry operation with 15,000 broilers and 4,000 layers was begun, all dressed poultry and eggs being sent to hospital kitchens. Progress was made toward increasing the swine herd so as to more nearly meet the need for pork. Emphasis was shifted from the production of dairy feed to poultry feed.

Fiscal Division

A total of \$2,643,790.88 was expended for maintenance, representing a daily per capita cost of \$1.388 for an average population of 5,217. Expenditures for mental hygiene work totalled \$78,-781.41, while \$783,079.33 was disbursed for permanent improvements and equipment. A detailed account of cash receipts and disbursements for all activities will be found in the next section of this report.

Personnel Division

In the performance of its normal functions the personnel office progressed toward refinements of its methods and procedures. The development and publication of uniform leave regulations represents a significant accomplishment in light of the existing need.

Supply Division

This division occupied the new warehouse and refrigeration plant, enlarged its perpetual inventory system, developed more efficient methods of handling supplies, and initiated a commissary operation for employees. The new building with its facilities has made possible more advantageous purchasing and more effective controls on supplies.

Very truly yours

CLEVE C. ODOM, M.D.

Superintendent

South Carolina State Hospital

and

State Mental Health Authority

FINANCIAL STATEMENT FOR THE YEAR ENDED JUNE 30, 1950

MAINTENANCE

Receipts

Appropriation State of S. C.	\$2,707,933.00	
Transferred from Trust Funds	2,058.35	
Transferred from Mental Hygiene Work	8,739.53	
Total Appropriation Funds	\$2,718,790.88	
Less Transferred to South Caro- lina Penitentiary	75,000.00	
		\$2,643,790.88

Disbursements

Salaries and Wages	\$1,214,059.06	
Repairs	62,572.02	
Water, Light, Heat and Power	63,591.69	
Food	790,362.25	
Fuel	115,191.07	
Clothing and Dry Goods	163,676.75	
Insurance	10,038.39	
Equipment	79,337.17	
All Other Expenditures	144,962.48	
Net Maintenance Expenditure		\$2,643,790.88
Average Daily Population	5,217	
Average Daily Per Capita Cost	1.388 plus	

TRUST FUNDS

Receipts

Brought Forward	\$ 2,058.35	
Fire Damage Building No. 13	39,000.00	
		\$ 41,058.35

Disbursements

Transferred to Maintenance.....	\$ 2,058.35	
Balance on Hand (Deposited with State Treasurer).....	39,000.00	
	<hr/>	\$ 41,058.35

INCOME—FOR GENERAL FUND OF STATE**Collections:**

Paying Patients.....	\$ 49,101.55	
Rental Quarters.....	9,480.00	
Subsistence	34,545.86	
Miscellaneous	6,270.46	
	<hr/>	
Remittance to State Treasurer.....		\$ 99,397.87

PERMANENT IMPROVEMENTS & RENOVATIONS

Balance on hand June 30, 1949.....	\$ 200,000.00	
Expenditures year 1949-1950.....	114,714.20	
	<hr/>	
Balance on hand Forwarded 1950-51 (Deposited with State Treasurer)		\$ 85,285.80

**STRUCTURAL & NON-STRUCTURAL IMPROVEMENTS
& EQUIPMENT****Receipts**

Balance on hand (Deposited with State Treasurer June 30, 1949)....	\$ 794,315.55	
From Federal Grant 1949-1950.....	250,359.13	
	<hr/>	\$1,044,674.68

Disbursements

Expended—1949-1950	\$ 783,079.33	
	<hr/>	
Balance on hand Forwarded to 1950- 1951 (Deposited with State Treasurer)	261,595.35	
	<hr/>	\$1,044,674.68

MENTAL HYGIENE WORK**Receipts**

Balance Federal Funds 1948-1949.....	\$ 2,620.47	
From State Appropriation.....	35,000.00	
From Federal Grant.....	51,810.00	
	<hr/>	\$ 89,430.47

Expenditures

State Funds.....	\$ 26,260.47	
Federal Funds.....	52,520.94	
State Funds—Transferred to Main- tenance Appropriation.....	8,739.53	
Federal Funds Forwarded to 1950- 1951	1,909.53	
	<hr/>	<hr/>
		\$ 89,430.47

RESIDENCE OF PATIENTS PRESENT, JUNE 30, 1950

COUNTIES	White Men	Negro Men	White Women	Negro Women	Total
Abbeville	16	15	20	14	65
Aiken	46	34	41	26	147
Allendale	16	18	13	14	61
Anderson	88	33	94	29	244
Bamberg	6	11	8	19	44
Barnwell	16	29	10	22	77
Beaufort	8	22	6	24	60
Berkeley	7	19	13	16	55
Calhoun	7	17	9	10	43
Charleston	91	117	104	96	408
Cherokee	24	16	41	15	96
Chester	18	22	29	33	102
Chesterfield	49	20	27	22	118
Clarendon	11	22	17	32	82
Colleton	23	28	26	21	98
Darlington	33	25	32	24	114
Dillon	10	10	19	15	54
Dorchester	8	21	7	21	57
Edgefield	13	20	12	14	59
Fairfield	21	26	15	31	93
Florence	23	54	39	36	152
Georgetown	14	32	11	15	72
Greenville	109	62	134	44	349
Greenwood	24	21	28	23	96
Hampton	13	11	12	18	54
Horry	18	21	34	13	86
Jasper	3	11	3	8	25
Kershaw	25	27	18	25	95
Lancaster	24	14	30	16	84
Laurens	52	32	23	24	131
Lee	17	10	15	21	63
Lexington	35	11	40	4	90
Marion	11	21	21	21	74
Marlboro	16	20	14	22	72
McCormick	6	7	5	12	30
Newberry	23	18	21	11	73
Oconee	30	13	33	8	84
Orangeburg	30	60	39	58	187
Pickens	45	4	34	9	92
Richland	110	97	107	111	425
Saluda	11	10	12	11	44
Spartanburg	113	54	136	55	358
Sumter	16	50	32	44	142
Union	26	16	28	17	87
Williamsburg	12	44	12	27	95
York	53	37	55	44	189
Total	1,370	1,282	1,479	1,195	5,326

RESIDENCE OF PATIENTS RECEIVED 1949-1950

COUNTIES	Population County	White Men	Negro Men	White Women	Negro Women	Total
Abbeville	22,475	15	5	8	4	32
Aiken	53,188	12	7	17	8	44
Allendale	12,475	7	3	5	2	17
Anderson	90,617	39	9	40	5	93
Bamberg	17,605	3	3	6	1	13
Barnwell	17,174	10	7	5	5	27
Beaufort	26,941	6	6	4	4	20
Berkeley	30,478	3	6	2	5	16
Calhoun	14,789	3	1	2	4	10
Charleston	159,838	37	26	32	17	112
Cherokee	34,913	20	4	15	4	43
Chester	32,571	25	6	8	9	48
Chesterfield	36,121	25	4	12	8	49
Clarendon	32,221	6	6	4	8	24
Colleton	28,251	10	9	9	7	35
Darlington	50,003	13	6	14	4	37
Dillon	30,936	5	7	11	8	31
Dorchester	22,598	5	7	3	3	18
Edgefield	16,608	10	3	1	5	19
Fairfield	21,791	4	11	8	3	26
Florence	79,014	20	17	15	9	61
Georgetown	31,426	8	9	4	2	23
Greenville	167,118	56	21	62	12	151
Greenwood	41,467	21	4	14	3	42
Hampton	18,153	11	6	3	2	22
Horry	59,862	9	10	15	4	38
Jasper	10,985	3	3	1	2	9
Kershaw	32,233	14	8	9	3	34
Lancaster	37,131	23	3	14	8	48
Laurens	46,924	27	10	15	6	58
Lee	23,168	6	..	9	3	18
Lexington	44,229	26	5	15	4	50
Marion	33,194	8	9	7	5	29
Marlboro	31,728	9	7	5	7	28
McCormick	9,571	4	7	..	3	14
Newberry	31,796	14	8	8	3	33
Oconee	39,016	15	5	12	2	34
Orangeburg	68,751	24	17	9	15	65
Pickens	40,043	16	3	11	2	32
Richland	141,880	68	40	55	26	189
Saluda	15,954	8	4	3	2	17
Spartanburg	147,930	68	14	55	10	147
Sumter	57,606	9	22	16	22	69
Union	31,259	11	6	16	1	34
Williamsburg	43,830	5	8	5	3	21
York	71,561	30	10	33	12	85
Total.....	2,107,432	771	392	617	285	2,065

OFFICERS AND EMPLOYEES

June 30, 1950

DEPARTMENT	Employed					Total	Vacancies		
	White Men	White Women	Negro Men	Negro Women	Men		Women	Total	
ADMINISTRATIVE DEPARTMENT:									
Superintendent	1	..	..	..	1	..	..	..
Business Manager.....	1	..	..	..	1	..	..	..
Treasurer	1	..	..	..	1	..	..	..
Personnel Officer.....	1	..	..	..	1	..	..	..
Secretaries .....	..	4	..	..	4	..	..	..
Other Personnel.....	2	8	..	..	10	..	..	..
GENERAL SERVICE DEPARTMENT:									
Chaplains	1	..	1	..	2	..	..	..
Recreational Director.....	..	1	..	..	1	..	..	..
Librarian .....	..	1	..	..	1	..	..	..
Canteen Manager.....	1	..	..	..	1	..	..	..
Other Personnel.....	14	11	1	5	31	1	3	4	
MEDICAL DEPARTMENT:									
Clinical Director.....	1	..	..	..	1	..	..	..
Physicians	11	..	..	..	11	3	..	3
Dentist	1	..	..	..	1	1	..	1
Social Workers.....	..	3	..	..	3	..	1	1
Druggist	1	..	..	..	1	..	..	..
Laboratory Technicians.....	4	1	..	..	5	..	..	..
Director of Nursing Education.....	..	1	..	..	1	..	..	..
Occupational Therapist.....	..	1	..	..	1	..	..	..
Medical Clerks.....	1	12	..	..	13	..	3	3
Supervisors and Assistants.....	8	9	1	..	18	..	..	..
Nurses .....	..	16	..	3	19	..	7	7
Nurses (Student).....	..	3	..	..	3	..	..	..
Attendants	93	77	75	67	312	8	7	15	
Other Personnel.....	..	..	..	..	..	1	..	1
GENERAL PLANT DEPARTMENT:									
Maintenance Division.....	59	1	44	2	106	11	..	11	
Traffic Division.....	27	1	..	10	38	..	..	..
Dietary Division.....	18	7	39	29	93	2	..	2	
Bakery Division.....	4	..	..	..	4	..	..	..
Storeroom Division	6	..	2	..	8	3	..	3	
Clothing Division.....	..	4	..	..	4	..	..	..
Laundry Division.....	5	5	13	24	47	1	..	1	
FARM AND DAIRY DEPARTMENTS:									
Dairy Division.....	4	..	2	..	6	..	..	..
Farm Division.....	3	1	19	..	23	8	..	8	
Total.....	268	167	197	140	772	39	21	60	

RETIRED

July 1, 1949 — June 30, 1950

P. C. Broome—

Retired—disability retirement 5-1-50
Department—Medical Auxiliary
Position—Charge of Mattress Shop
Date Employment—November 16, 1920

Hardy Glover—

Retired—disability retirement 11-1-49
Department—General Plant
Position—Ice Plant Attendant
Date Employment—May 7, 1934

E. D. Moore—

Retired—9-17-49
Department—Farm Department
Position—Laborer
Date Employment—9-19-15

Moye Swann—

Retired—11-1-49
Department—Medical
Position—Drug Clerk—State Park
Date Employment—October 12, 1914

G. A. Spearman—

Retired—6-30-50
Department—General Plant
Position—Gateman
Date Employment—November 22, 1922

EXPIRED

July 1, 1949 — June 30, 1950

Arthur Dinkins—

Died—March 7, 1950

Department—General Plant

Position—Truck Driver

Date Employment—November 26, 1946

Henry Coward—

Died—March 31, 1950

Department—General Plant

Position—Night Chauffeur

Date Employment—March 10, 1946

Ernest Miller—

Died—December 14, 1949

Department—Farm Department

Position—Feeder

Date Employment—November 11, 1941

John L. Young—

Died—November 21, 1949

Department—General Plant

Position—Guard

Date Employment—February 1, 1949

Statistical Tables **PSYCHOSES OF FIRST ADMISSIONS**

PSYCHOSES	Code No.	White Men	White Women	Negro Men	Negro Women	Total
With syphilitic meningo-encephalitis (general paresis).....	100	21	10	37	12	80*
Total.....		21	10	37	12	80*
With meningo-vascular syphilis.....	210	..	..	1	1	2
Total.....		..	..	1	1	2*
With epidemic encephalitis.....	300	..	2	..	1	3
Total.....		..	2	..	1	3*
With other infectious diseases.....	440	..	..	1	..	1
TOTAL.....		..	..	1	..	1*
Due to alcohol:						
Pathological intoxication.....	510	3	..	..	..	3
Delirium tremens.....	520	13	..	4	1	18
Acute hallucinosis.....	540	4	1	9	..	14
Other types.....	550	2	..	..	..	2
Total.....		22	1	13	1	37*
Due to a drug or other exogenous poison:						
Opium or a derivative.....	630	..	1	..	..	1
Another drug.....	640	2	7	1	..	10
Total.....		2	8	1	..	11*
Due to trauma:						
Personality disorder due to trauma.....	720	1	..	..	1	2
Mental deterioration due to trauma.....	730	..	..	1	..	1
Other types.....	740	1	..	..	..	1
Total.....		2	..	1	1	4*
With cerebral arteriosclerosis.....	800	90	76	66	34	266
Total.....		90	76	66	34	266*
With other disturbances of circulation:						
Cardio-renal disease.....	920	7	2	8	2	19
Other types.....	930	..	1	1	2	4
Total.....		7	3	9	4	23*
Due to convulsive disorder (epilepsy):						
Epileptic deterioration.....	1010	8	1	8	5	22
Epileptic clouded states.....	1020	2	..	2	1	5
Other epileptic types.....	1030	2	..	1	1	4
Total.....		12	1	11	7	31*
Senile:						
Simple deterioration.....	1110	27	36	14	8	85
Presbyophrenic	1120	..	1	..	..	1
Delirious and confused.....	1130	1	..	..	..	1
Depressed and agitated.....	1140	..	1	..	1	2
Paranoid	1150	..	1	1	3	5
Total.....		28	39	15	12	94*
Involuntional:						
Melancholia	1210	17	15	..	1	33
Paranoid	1220	3	9	..	..	12
Total.....		20	24	..	1	45*
Due to other metabolic, etc., diseases:						
Pellagra	1340	..	..	..	1	1
Other somatic disease.....	1350	2	1	1	1	5
Total.....		2	1	1	2	6*

PSYCHOSES OF FIRST ADMISSIONS—Continued

PSYCHOSES	Code No.	White Men	White Women	Negro Men	Negro Women	Total
Due to unknown or hereditary cause but associated with organic change:						
Huntington's chorea.....	1530	1	1	..	..	2
Other disease of the brain or nervous system.....	1540	2	2	..	..	4
Total.....		3	3	..	..	6*
Psychoneuroses:						
Hysteria.....	1610	15	64	4	1	84
Psychasthenia or compulsive states.....	1620	..	10	..	..	10
Neurasthenia.....	1630	1	..	..	..	1
Hypochondriasis.....	1640	1	..	..	..	1
Reactive depression.....	1650	10	6	..	..	16
Anxiety state.....	1660	7	5	2	1	15
Mixed psychoneurosis.....	1680	..	11	1	2	14
Total.....		34	96	7	4	141*
Manic-depressive:						
Manic.....	1710	21	12	29	30	92
Depressive.....	1720	12	19	1	4	36
Perplexed.....	1740	2	1	..	..	3
Total.....		35	32	30	34	131*
Dementia praecox (schizophrenia):						
Simple.....	1810	3	1	1	..	5
Hebephrenic.....	1820	23	10	18	19	70
Catatonic.....	1830	22	57	39	46	164
Paranoid.....	1840	24	38	21	19	102
Other types.....	1850	..	2	..	..	2
Total.....		72	108	79	84	343*
Paranoia and Paranoid conditions:						
Paranoid conditions.....	1920	10	7	1	..	18
Total.....		10	7	1	..	18*
With mental deficiency.....	2100	21	9	20	10	60
Total.....		21	9	20	10	60*
Undiagnosed.....	2200	2	1	1	..	4
Total.....		2	1	1	..	4*
Total with psychoses.....		383	421	294	208	1306*
Without psychoses:						
Without mental disorder.....	2300	36	4	10	2	52*
Epilepsy.....	2310	3	2	1	1	7
Alcoholism.....	2320	119	6	12	1	138
Drug addiction.....	2330	3	7	..	..	10
Mental deficiency.....	2340	11	11	24	14	60
Psychopathic personality.....	2360	13	2	1	..	16
Psychopathic personality with pathologic sexuality.....	2361	2	..	..	..	2
Psychopathic personality with pathologic emotionality.....	2362	2	..	..	..	2
Psychopathic personality with social or amoral trends.....	2363	3	..	..	1	4
Psychopathic personality—mixed trends.....	2364	1	1	..	..	2
Other nonpsychotic diseases or conditions.....	2370	4	4	6	2	16
Total.....		197	37	54	21	309*
Primary behavior disorders:						
Simple adult maladjustment.....	2410	2	3	..	..	5
Primary behavior disorders in children.....	2420	1	..	..	..	1
Conduct disturbance.....	2422	2	..	..	..	2
Total.....		5	3	..	..	8*
Total without psychoses.....		202	40	54	21	317*
GRAND TOTAL.....		585	461	348	229	1623*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
White Race

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	21	10	31
With epidemic encephalitis.....	3	..	2	2
Due to alcohol.....	5	22	1	23
Due to a drug or other exogenous poison.....	6	2	8	10
Due to trauma.....	7	2	..	2
With cerebral arteriosclerosis.....	8	90	76	166
With other disturbances of circulation.....	9	7	3	10
Due to convulsive disorder (epilepsy).....	10	12	1	13
Senile.....	11	28	39	67
Involuntal.....	12	20	24	44
Due to other metabolic, etc., diseases.....	13	2	1	3
Due to unknown or hereditary causes but associated with organic change.....	15	3	3	6
Psychoneuroses.....	16	34	96	130
Manic-depressive.....	17	35	32	67
Dementia praecox (schizophrenia).....	18	72	108	180
Paranoia and paranoid conditions.....	19	10	7	17
With mental deficiency.....	21	21	9	30
Undiagnosed.....	22	2	1	3
Without mental disorder.....	23	197	37	234
Primary behavior disorders.....	24	5	3	8
Total.....		585	461	1046*
Under 15 Years:				
Psychoneuroses.....	16	..	1	1
Dementia praecox (schizophrenia).....	18	1	..	1
Without mental disorder.....	23	5	2	7
Primary behavior disorders.....	24	1	..	1
Total.....		8	3	11*
15-19 Years:				
Due to convulsive disorder (epilepsy).....	10	1	..	1
Psychoneuroses.....	16	3	3	6
Manic-depressive.....	17	2	..	2
Dementia praecox (schizophrenia).....	18	7	11	18
With mental deficiency.....	21	3	3	6
Without mental disorder.....	23	7	2	9
Primary behavior disorders.....	24	3	1	4
Total.....		26	20	46*
20-24 Years:				
Due to convulsive disorder (epilepsy).....	10	2	..	2
Psychoneuroses.....	16	7	9	16
Manic depressive.....	17	3	1	4
Dementia praecox (schizophrenia).....	18	11	19	30
With mental deficiency.....	21	2	2	4
Without mental disorder.....	23	20	2	22
Primary behavior disorders.....	24	1	..	1
Total.....		46	33	79*
25-29 Years:				
Due to alcohol.....	5	3	..	3
Due to a drug or other exogenous poison.....	6	..	1	1
Psychoneuroses.....	16	1	14	15
Manic-depressive.....	17	1	3	4
Dementia praecox (schizophrenia).....	18	12	16	28
Paranoia and paranoid conditions.....	19	1	1	2
With mental deficiency.....	21	6	..	6
Undiagnosed.....	22	2	..	2
Without mental disorder.....	23	22	7	29
Primary behavior disorders.....	24	..	2	2
Total.....		48	44	92*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL
PSYCHOSES—Continued
White Race

PSYCHOSES	Code No.	Men	Women	Total
30-34 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	1	2
Due to alcohol	5	3	1	4
Due to a drug or other exogenous poison.....	6	2	1	3
Due to trauma	7	1	..	1
Due to convulsive disorder (epilepsy).....	10	..	1	1
Psychoneuroses	16	2	20	22
Manic-depressive	17	4	4	8
Dementia praecox (schizophrenia).....	18	13	27	40
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	3	1	4
Without mental disorder.....	23	27	5	32
Total.....		57	61	118*
35-39 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	3	6
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	5	..	5
Due to a drug or other exogenous poison.....	6	..	1	1
Due to trauma	7	1	..	1
Due to convulsive disorder (epilepsy).....	10	2	..	2
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Psychoneuroses	16	9	15	24
Manic-depressive	17	9	9	18
Dementia praecox (schizophrenia).....	18	12	16	28
Paranoia and paranoid conditions.....	19	1	1	2
With mental deficiency.....	21	..	1	1
Without mental disorder.....	23	39	8	47
Total.....		82	55	137*
40-44 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	..	5
Due to alcohol	5	8	..	8
Due to a drug or other exogenous poison.....	6	..	3	3
With other disturbances of circulation.....	9	..	1	1
Involutional	12	..	2	2
Psychoneuroses	16	6	12	18
Manic-depressive	17	3	2	5
Dementia praecox (schizophrenia).....	18	6	8	14
Paranoia and paranoid conditions.....	19	3	4	7
Psychoses with mental deficiency.....	21	5	2	7
Undiagnosed	22	..	1	1
Without mental disorder.....	23	29	3	32
Total.....		65	38	103*
45-49 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	2	5
Due to alcohol	5	1	..	1
With cerebral arteriosclerosis.....	8	3	1	4
With other disturbances of circulation.....	9	..	2	2
Due to convulsive disorder (epilepsy).....	10	3	..	3
Involutional	12	4	11	15
Due to other metabolic, etc., diseases.....	13	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	..	2	2
Psychoneuroses	16	2	9	11
Manic-depressive	17	4	6	10
Dementia praecox (schizophrenia).....	18	3	7	10
Paranoia and paranoid conditions.....	19	2	1	3
Without mental disorder.....	23	20	1	21
Total.....		46	42	88*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL
PSYCHOSES—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
50-54 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	1	4
With epidemic encephalitis.....	3	..	1	1
Due to alcohol.....	5	1	..	1
Due to a drug or other exogenous poison.....	6	..	2	2
With cerebral arteriosclerosis.....	8	5	1	6
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile.....	11	..	1	1
Involuntional.....	12	6	8	14
Due to other metabolic, etc., diseases.....	13	..	1	1
Due to unknown or hereditary cause but associated with organic change.....	15	2	1	3
Psychoneuroses.....	16	..	3	3
Manic-depressive.....	17	3	3	6
Dementia praecox (schizophrenia).....	18	4	4	8
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	14	4	18
Total.....		40	30	70*
55-59 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	2	5
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	19	14	33
With other disturbances of circulation.....	9	2	..	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Involuntional.....	12	6	3	9
Psychoneuroses.....	16	2	4	6
Manic-depressive.....	17	2	..	2
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	8	..	8
Total.....		46	23	69*
60-64 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	22	19	41
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile.....	11	..	1	1
Involuntional.....	12	4	..	4
Psychoneuroses.....	16	..	1	1
Manic-depressive.....	17	2	3	5
Dementia praecox (schizophrenia).....	18	2	..	2
Paranoia and paranoid conditions.....	19	1	..	1
Without mental disorder.....	23	2	..	2
Total.....		35	24	59*
65-69 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	21	10	31
With other disturbances of circulation.....	9	4	..	4
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile.....	11	3	3	6
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses.....	16	1	2	3
Manic-depressive.....	17	2	1	3
Without mental disorder.....	23	1	..	1
Total.....		35	16	51*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL
PSYCHOSES—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
70 Years and Over:				
With cerebral arteriosclerosis.....	8	20	30	50
With other disturbances of circulation.....	9	1	..	1
Senile	11	25	34	59
Psychoneuroses	16	..	2	2
Without mental disorder.....	23	..	2	2
Total.....		46	68	114*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	1	1
With cerebral arteriosclerosis.....	8	..	1	1
Psychoneuroses	16	1	1	2
Dementia praecox (schizophrenia).....	18	1	..	1
Without mental disorder.....	23	3	1	4
Total.....		5	4	9*

**AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL
PSYCHOSES—Continued
Negro Race**

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	37	12	49
With other forms of syphilis of the central nervous system.....	2	1	1	2
With epidemic encephalitis.....	3	..	1	1
With other infectious diseases.....	4	1	..	1
Due to alcohol.....	5	13	1	14
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma.....	7	1	1	2
With cerebral arteriosclerosis.....	8	66	34	100
With other disturbances of circulation.....	9	9	4	13
Due to convulsive disorder (epilepsy).....	10	11	7	18
Senile.....	11	15	12	27
Involuntional.....	12	..	1	1
Due to other metabolic, etc., diseases.....	13	1	2	3
Psychoneuroses.....	16	7	4	11
Manic-depressive.....	17	30	34	64
Dementia praecox (schizophrenia).....	18	79	84	163
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	20	10	30
Undiagnosed.....	22	1	..	1
Without mental disorder.....	23	54	21	75
Total.....		348	229	577*
Under 15 Years:				
Due to convulsive disorder (epilepsy).....	10	..	1	1
Dementia praecox (schizophrenia).....	18	..	2	2
With mental deficiency.....	21	..	1	1
Without mental disorder.....	23	14	5	19
Total.....		14	9	23*
15-19 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
Due to convulsive disorder (epilepsy).....	10	3	..	3
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses.....	16	2	..	2
Manic-depressive.....	17	4	3	7
Dementia praecox (schizophrenia).....	18	10	7	17
With mental deficiency.....	21	3	2	5
Without mental disorder.....	23	9	3	12
Total.....		33	15	48*
20-24 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
Due to alcohol.....	5	1	..	1
Due to convulsive disorder (epilepsy).....	10	4	..	4
Psychoneuroses.....	16	3	1	4
Manic-depressive.....	17	5	4	9
Dementia praecox (schizophrenia).....	18	21	11	32
With mental deficiency.....	21	5	2	7
Undiagnosed.....	22	1	..	1
Without mental disorder.....	23	4	4	8
Total.....		46	22	68*
25-29 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	1	3
Due to alcohol.....	5	2	..	2
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma.....	7	1	..	1
With other disturbances of circulation.....	9	..	1	1
Due to convulsive disorder (epilepsy).....	10	3	2	5
Psychoneuroses.....	16	..	1	1
Manic-depressive.....	17	3	6	9
Dementia praecox (schizophrenia).....	18	17	21	38
With mental deficiency.....	21	6	1	7
Without mental disorder.....	23	3	5	8
Total.....		38	38	76*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
30-34 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	3	..	3
Due to trauma	7	..	1	1
Due to convulsive disorder (epilepsy).....	10	..	2	2
Due to other metabolic, etc., diseases.....	13	..	1	1
Psychoneuroses	16	..	1	1
Manic-depressive	17	6	5	11
Dementia praecox (schizophrenia).....	18	14	17	31
With mental deficiency.....	21	3	1	4
Without mental disorder.....	23	9	2	11
Total.....		37	30	67*
35-39 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	2	5
Due to alcohol	5	5	1	6
With cerebral arteriosclerosis.....	8	1	..	1
With other disturbances of circulation.....	9	..	1	1
Due to convulsive disorder (epilepsy).....	10	..	2	2
Due to other metabolic, etc., diseases.....	13	..	1	1
Psychoneuroses	16	1	1	2
Manic-depressive	17	3	5	8
Dementia praecox (schizophrenia).....	18	12	12	24
With mental deficiency.....	21	1	1	2
Without mental disorder.....	23	5	..	5
Total.....		31	26	57*
40-44 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	11	3	14
With epidemic encephalitis.....	3	..	1	1
With cerebral arteriosclerosis.....	8	1	3	4
Psychoneuroses	16	1	..	1
Manic-depressive	17	4	7	11
Dementia praecox (schizophrenia).....	18	4	11	15
With mental deficiency.....	21	2	2	4
Without mental disorder.....	23	2	2	4
Total.....		25	29	54*
45-49 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	4	7
Due to alcohol	5	1	..	1
With cerebral arteriosclerosis.....	8	5	3	8
With other disturbances of circulation.....	9	..	1	1
Involuntal	12	..	1	1
Manic-depressive	17	3	2	5
Dementia praecox (schizophrenia).....	18	..	2	2
Without mental disorder.....	23	1	..	1
Total.....		13	13	26*
50-54 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	..	3
Due to alcohol	5	1	..	1
With cerebral arteriosclerosis.....	8	11	8	19
With other disturbances of circulation.....	9	1	..	1
Manic-depressive	17	2	1	3
Without mental disorder.....	23	3	..	3
Total.....		21	9	30*

AGE OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO PRINCIPAL
PSYCHOSES—Continued

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
55-59 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	..	4
With other forms of syphilis of the central nervous system.....	2	1	1	2
With cerebral arteriosclerosis.....	8	9	3	12
With other disturbances of circulation.....	9	2	1	3
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	..	1	1
Without mental disorder.....	23	1	..	1
Total.....		17	7	24*
60-64 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	14	6	20
With other disturbances of circulation.....	9	1	..	1
Senile	11	..	1	1
Total.....		16	7	23*
65-69 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	..	4
With cerebral arteriosclerosis.....	8	8	7	15
With other disturbances of circulation.....	9	1	..	1
Senile	11	1	2	3
Paranoia and paranoid conditions.....	19	1	..	1
Total.....		15	9	24*
70 Years and Over:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	2	4
With cerebral arteriosclerosis.....	8	16	4	20
With other disturbances of circulation.....	9	3	..	3
Senile	11	13	9	22
Total.....		34	15	49*
Unascertained:				
With cerebral arteriosclerosis.....	8	1	..	1
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	..	1
Dementia praecox (schizophrenia).....	18	1	..	1
Without mental disorder.....	23	3	..	3
Total.....		8	..	8*

**DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

White Race

PSYCHOSES	Code No.	Men	Women	Total
Illiterate:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	2	2
Due to alcohol	5	1	..	1
Due to a drug or other exogenous poison.....	6	..	1	1
With cerebral arteriosclerosis.....	8	11	5	16
With other disturbances of circulation.....	9	3	..	3
Due to convulsive disorder (epilepsy).....	10	3	..	3
Senile	11	5	4	9
Involuntal	12	3	2	5
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Psychoneuroses	16	2	4	6
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	5	2	7
Paranoia and paranoid conditions.....	19	1	1	2
With mental deficiency.....	21	6	3	9
Without mental disorder.....	23	19	2	21
Total.....		60	28	88*
Reads and Writes:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With epidemic encephalitis.....	3	..	1	1
With cerebral arteriosclerosis.....	8	3	..	3
Senile	11	..	2	2
Involuntal	12	..	1	1
Manic-depressive	17	1	..	1
Dementia praecox (schizophrenia).....	18	4	..	4
With mental deficiency.....	21	3	1	4
Without mental disorder.....	23	9	1	10
Primary behavior disorders.....	24	1	..	1
Total.....		23	6	29*
Common School:				
With syphilitic meningo-encephalitis (general paresis).....	1	11	4	15
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	14	..	14
Due to a drug or other exogenous poison.....	6	1	3	4
With cerebral arteriosclerosis.....	8	51	41	92
With other disturbances of circulation.....	9	3	1	4
Due to convulsive disorder (epilepsy).....	10	7	1	8
Senile	11	17	15	32
Involuntal	12	8	12	20
Due to other metabolic, etc., diseases.....	13	2	..	2
Due to unknown or hereditary cause but associated with organic change	15	2	2	4
Psychoneuroses	16	23	47	70
Manic-depressive	17	19	14	33
Dementia praecox (schizophrenia).....	18	32	43	75
Paranoia and paranoid conditions.....	19	6	2	8
With mental deficiency.....	21	8	5	13
Undiagnosed	22	1	1	2
Without mental disorder.....	23	88	14	102
Primary behavior disorders.....	24	2	2	4
Total.....		295	208	503*

**DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued**

White Race

PSYCHOSES	Code No.	Men	Women	Total
High School:				
With syphilitic meningo-encephalitis (general paresis).....	1	6	2	8
Due to alcohol	5	2	1	3
Due to a drug or other exogenous poison.....	6	1	3	4
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	12	15	27
With other disturbances of circulation.....	9	..	1	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	2	..	2
Involuntal	12	4	6	10
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Psychoneuroses	16	4	33	37
Manic-depressive	17	8	10	18
Dementia praecox (schizophrenia).....	18	21	46	67
Paranoia and paranoid conditions.....	19	2	3	5
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	50	11	61
Primary behavior disorders.....	24	2	1	3
Total.....		118	136	254*
College:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
Due to alcohol	5	4	..	4
With cerebral arteriosclerosis.....	8	6	9	15
With other disturbances of circulation.....	9	1	1	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	..	7	7
Involuntal	12	3	..	3
Psychoneuroses	16	1	4	5
Manic-depressive	17	5	4	9
Dementia praecox (schizophrenia).....	18	6	10	16
Paranoia and paranoid conditions.....	19	1	1	2
Undiagnosed	22	1	..	1
Without mental disorder.....	23	20	2	22
Total.....		51	38	89*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	2	2
Due to alcohol	5	1	..	1
Due to a drug or other exogenous poison.....	6	..	1	1
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	7	6	13
Senile	11	4	7	11
Involuntal	12	2	3	5
Due to other metabolic, etc., diseases.....	13	..	1	1
Psychoneuroses	16	4	8	12
Manic-depressive	17	1	3	4
Dementia praecox (schizophrenia).....	18	4	7	11
With mental deficiency.....	21	3	..	3
Without mental disorder.....	23	11	7	18
Total.....		38	45	83*

**DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Illiterate:				
With syphilitic meningo-encephalitis (general paresis).....	1	8	4	12
Due to alcohol	5	3	..	3
Due to trauma	8	25	14	39
With other disturbances of circulation.....	9	4	1	5
Due to convulsive disorder (epilepsy).....	10	3	3	6
Senile	11	9	6	15
Psychoneuroses	16	1	..	1
Manic-depressive	17	5	6	11
Dementia praecox (schizophrenia).....	18	7	7	14
With mental deficiency.....	21	8	6	14
Without mental disorder.....	23	28	13	41
Total.....		101	60	161*
Reads and Writes:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	..	5
Due to alcohol	5	1	..	1
Due to trauma	8	3	..	3
With other disturbances of circulation.....	9	1	..	1
Psychoneuroses	16	1	..	1
Dementia praecox (schizophrenia).....	18	9	..	9
With mental deficiency.....	21	3	..	3
Without mental disorder.....	23	5	..	5
Total.....		28	..	28*
Common School:				
With syphilitic meningo-encephalitis (general paresis).....	1	19	6	25
With other forms of syphilis of the central nervous system.....	2	1	1	2
Due to alcohol	5	6	1	7
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	19	14	33
With other disturbances of circulation.....	9	2	3	5
Due to convulsive disorder (epilepsy).....	10	6	3	9
Senile	11	3	5	8
Involuntional	12	..	1	1
Due to other metabolic, etc., diseases.....	13	..	2	2
Psychoneuroses	16	2	..	2
Manic-depressive	17	18	19	37
Dementia praecox (schizophrenia).....	18	46	51	97
With mental deficiency.....	21	4	2	6
Without mental disorder.....	23	13	7	20
Total.....		141	115	256*
High School:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	1	1
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	2	..	2
Due to trauma	7	..	1	1
With cerebral arteriosclerosis.....	8	1	1	2
Due to convulsive disorder (epilepsy).....	10	..	1	1
Psychoneuroses	16	2	1	3
Manic-depressive	17	4	5	9
Dementia praecox (schizophrenia).....	18	4	9	13
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	..	1	1
Total.....		14	21	35*

DEGREE OF EDUCATION OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
College:				
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	..	1	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Psychoneuroses.....	16	..	1	1
Manic-depressive.....	17	2	2	4
Dementia praecox (schizophrenia).....	18	..	6	6
Paranoia and paranoid conditions.....	19	1	..	1
Undiagnosed.....	22	1	..	1
Total.....		6	10	16*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	1	6
With other infectious diseases.....	4	1	..	1
With cerebral arteriosclerosis.....	8	18	4	22
With other disturbances of circulation.....	9	2	..	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile.....	11	3	1	4
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses.....	16	1	2	3
Manic-depressive.....	17	1	2	3
Dementia praecox (schizophrenia).....	18	13	11	24
With mental deficiency.....	21	4	2	6
Without mental disorder.....	23	8	..	8
Total.....		58	23	81*

ENVIRONMENT FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES

White Race

PSYCHOSES	Code No.	Men	Women	Total
Urban:				
With syphilitic meningo-encephalitis (general paresis).....	1	10	7	17
Due to alcohol	5	11	1	12
Due to a drug or other exogenous poison.....	6	..	4	4
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	38	30	68
With other disturbances of circulation.....	9	3	1	4
Due to convulsive disorder (epilepsy).....	10	3	..	3
Senile	11	12	20	32
Involuntal	12	11	12	23
Due to other metabolic, etc., diseases.....	13	..	1	1
Due to unknown or hereditary cause but associated with organic change	15	1	1	2
Psychoneuroses	16	15	44	59
Manic-depressive	17	19	14	33
Dementia praecox (schizophrenia).....	18	34	46	80
Paranoia and paranoid conditions.....	19	5	4	9
With mental deficiency.....	21	4	4	8
Without mental disorder.....	23	96	16	112
Primary behavior disorders.....	24	4	1	5
Total.....		267	206	473*
Rural:				
With syphilitic meningo-encephalitis (general paresis).....	1	8	2	10
With epidemic encephalitis.....	3	..	2	2
Due to alcohol	5	8	..	8
Due to a drug or other exogenous poison.....	6	2	4	6
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	48	38	86
With other disturbances of circulation.....	9	4	2	6
Due to convulsive disorder (epilepsy).....	10	7	1	8
Senile	11	15	16	31
Involuntal	12	8	11	19
Due to other metabolic, etc., diseases.....	13	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	2	2	4
Psychoneuroses	16	12	45	57
Manic-depressive	17	15	16	31
Dementia praecox (schizophrenia).....	18	31	48	79
Paranoia and paranoid conditions.....	19	5	2	7
With mental deficiency.....	21	17	5	22
Undiagnosed	22	1	..	1
Without mental disorder.....	23	76	17	93
Primary behavior disorders.....	24	1	2	3
Total.....		262	213	475*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	1	4
Due to alcohol	5	3	..	3
With cerebral arteriosclerosis.....	8	4	8	12
Due to convulsive disorder (epilepsy).....	10	2	..	2
Senile	11	1	3	4
Involuntal	12	1	1	2
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses	16	7	7	14
Manic-depressive	17	1	2	3
Dementia praecox (schizophrenia).....	18	7	14	21
Paranoia and paranoid conditions.....	19	..	1	1
Undiagnosed	22	1	1	2
Without mental disorder.....	23	25	4	29
Total.....		56	42	98*

**ENVIRONMENT OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Urban:				
With syphilitic meningo-encephalitis (general paresis).....	1	15	9	24
With epidemic encephalitis.....	3	..	1	1
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	5	1	6
With cerebral arteriosclerosis.....	8	23	14	37
With other disturbances of circulation.....	9	4	1	5
Due to convulsive disorder (epilepsy).....	10	3	5	8
Senile	11	2	5	7
Psychoneuroses	16	4	1	5
Manic-depressive	17	6	18	24
Dementia praecox (schizophrenia).....	18	28	45	73
With mental deficiency.....	21	4	4	8
Undiagnosed	22	1	..	1
Without mental disorder.....	23	18	12	30
Total.....		114	116	230*
Rural:				
With syphilitic meningo-encephalitis (general paresis).....	1	17	3	20
With other forms of syphilis of the central nervous system.....	2	1	1	2
Due to alcohol	5	8	..	8
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma	7	1	1	2
With cerebral arteriosclerosis.....	8	31	20	51
With other disturbances of circulation.....	9	5	3	8
Due to convulsive disorder (epilepsy).....	10	6	2	8
Senile	11	13	7	20
Involuntional	12	..	1	1
Due to other metabolic, etc., diseases.....	13	1	2	3
Psychoneuroses	16	3	3	6
Manic-depressive	17	16	15	31
Dementia praecox (schizophrenia).....	18	42	37	79
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	13	6	19
Without mental disorder.....	23	24	9	33
Total.....		183	110	293*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	..	5
With cerebral arteriosclerosis.....	8	12	..	12
Due to convulsive disorder (epilepsy).....	10	2	..	2
Manic-depressive	17	8	1	9
Dementia praecox (schizophrenia).....	18	9	2	11
With mental deficiency.....	21	3	..	3
Without mental disorder.....	23	12	..	12
Total.....		51	3	54

**USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

White Race

PSYCHOSES	Code No.	Men	Women	Total
Abstinent:				
With syphilitic meningo-encephalitis (general paresis).....	1	14	9	23
With epidemic encephalitis.....	3	..	2	2
Due to a drug or other exogenous poison.....	6	2	3	5
With cerebral arteriosclerosis.....	8	70	70	140
With other disturbances of circulation.....	9	5	3	8
Due to convulsive disorder (epilepsy).....	10	9	1	10
Senile	11	26	35	61
Involuntal	12	18	22	40
Due to other metabolic, etc., diseases.....	13	2	1	3
Due to unknown or hereditary cause but associated with organic change	15	2	3	5
Psychoneuroses	16	21	79	100
Manic-depressive	17	26	29	55
Dementia praecox (schizophrenia).....	18	48	95	143
Paranoia and paranoid conditions.....	19	7	6	13
With mental deficiency.....	21	16	9	25
Undiagnosed	22	1	1	2
Without mental disorder.....	23	34	23	57
Primary behavior disorders.....	24	4	3	7
Total.....		305	394	699*
Temperate:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	..	5
Due to alcohol	5	1	..	1
Due to a drug or other exogenous poison.....	6	..	1	1
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	9	6	15
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	2	..	2
Senile	11	2	1	3
Involuntal	12	1	1	2
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Psychoneuroses	16	10	9	19
Manic-depressive	17	4	..	4
Dementia praecox (schizophrenia).....	18	16	7	23
Paranoia and paranoid conditions.....	19	3	..	3
With mental deficiency.....	21	2	..	2
Without mental disorder.....	23	40	3	43
Primary behavior disorders.....	24	1	..	1
Total.....		99	28	127*
Intemperate:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	1	3
Due to alcohol	5	21	1	22
Due to a drug or other exogenous poison.....	6	..	1	1
With cerebral arteriosclerosis.....	8	6	..	6
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Involuntal	12	1	..	1
Psychoneuroses	16	2	1	3
Manic-depressive	17	5	..	5
Dementia praecox (schizophrenia).....	18	1	1	2
Paranoia and paranoid conditions.....	19	..	1	1
With mental deficiency.....	21	2	..	2
Without mental disorder.....	23	115	7	122
Total.....		157	13	170*

USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
Unascertained:				
Due to a drug or other exogenous poison.....	6	..	3	3
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	5	..	5
Senile	11	..	3	3
Involutional	12	..	1	1
Psychoneuroses	16	1	7	8
Manic-depressive	17	..	3	3
Dementia praecox (schizophrenia).....	18	7	5	12
With mental deficiency.....	21	1	..	1
Undiagnosed	22	1	..	1
Without mental disorder.....	23	8	4	12
Total.....		24	26	50*

USE OF ALCOHOL BY FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES
Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Abstinent:				
With syphilitic meningo-encephalitis (general paresis).....	1	11	10	21
With other forms of syphilis of the central nervous system.....	2	..	1	1
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	1	..	1
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma	7	..	1	1
With cerebral arteriosclerosis.....	8	39	28	67
With other disturbances of circulation.....	9	3	2	5
Due to convulsive disorder (epilepsy).....	10	5	7	12
Senile	11	9	10	19
Involutional	12	..	1	1
Due to other metabolic, etc., diseases.....	13	1	2	3
Psychoneuroses	16	2	3	5
Manic-depressive	17	11	27	38
Dementia praecox (schizophrenia).....	18	35	70	105
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	9	9	18
Without mental disorder.....	23	29	20	49
Total.....		157	192	349*
Temperate:				
With syphilitic meningo-encephalitis (general paresis).....	1	8	1	9
With other infectious diseases.....	4	1	..	1
With cerebral arteriosclerosis.....	8	8	3	11
With other disturbances of circulation.....	9	4	1	5
Due to convulsive disorder (epilepsy).....	10	4	..	4
Senile	11	4	..	4
Psychoneuroses	16	1	..	1
Manic-depressive	17	9	2	11
Dementia praecox (schizophrenia).....	18	19	5	24
With mental deficiency.....	21	3	..	3
Without mental disorder.....	23	7	..	7
Total.....		68	12	80*
Intemperate:				
With syphilitic meningo-encephalitis (general paresis).....	1	9	1	10
Due to alcohol	5	10	1	11
With cerebral arteriosclerosis.....	8	9	1	10
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	..	1
Psychoneuroses	16	2	..	2
Manic-depressive	17	5	2	7
Dementia praecox (schizophrenia).....	18	13	1	14
With mental deficiency.....	21	4	..	4
Undiagnosed	22	1	..	1
Without mental disorder.....	23	13	1	14
Total.....		69	7	76*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	9	..	9
With other forms of syphilis of the central nervous system.....	2	1	..	1
Due to alcohol	5	2	..	2
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	10	2	12
With other disturbances of circulation.....	9	1	1	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	2	3
Psychoneuroses	16	2	1	3
Manic-depressive	17	5	3	8
Dementia praecox (schizophrenia).....	18	12	8	20
With mental deficiency.....	21	4	1	5
Without mental disorder.....	23	5	..	5
Total.....		54	18	72*

**MARITAL STATUS OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

White Race

PSYCHOSES	Code No.	Men	Women	Total
Single:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
Due to alcohol	5	9	..	9
Due to a drug or other exogenous poison.....	6	..	1	1
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	10	7	17
With other disturbances of circulation.....	9	..	1	1
Due to convulsive disorder (epilepsy).....	10	6	..	6
Senile	11	3	7	10
Involutional	12	1	4	5
Due to unknown or hereditary cause but associated with organic change	15	2	..	2
Psychoneuroses	16	11	8	19
Manic-depressive	17	7	3	10
Dementia praecox (schizophrenia).....	18	38	25	63
Paranoia and paranoid conditions.....	19	1	1	2
With mental deficiency.....	21	16	8	24
Undiagnosed	22	1	..	1
Without mental disorder.....	23	52	11	63
Primary behavior disorders.....	24	4	..	4
Total.....		163	76	239*
Married:				
With syphilitic meningo-encephalitis (general paresis).....	1	18	6	24
With epidemic encephalitis.....	3	..	2	2
Due to alcohol	5	11	1	12
Due to a drug or other exogenous poison.....	6	2	7	9
With cerebral arteriosclerosis.....	8	52	24	76
With other disturbances of circulation.....	9	4	2	6
Due to convulsive disorder (epilepsy).....	10	5	1	6
Senile	11	19	11	30
Involutional	12	19	15	34
Due to other metabolic, etc., diseases.....	13	2	1	3
Due to unknown or hereditary cause but associated with organic change	15	..	2	2
Psychoneuroses	16	17	72	89
Manic-depressive	17	24	26	50
Dementia praecox (schizophrenia).....	18	26	63	89
Paranoia and paranoid conditions.....	19	7	4	11
With mental deficiency.....	21	3	1	4
Undiagnosed	22	1	..	1
Without mental disorder.....	23	100	13	113
Primary behavior disorders.....	24	1	1	2
Total.....		311	252	563*
Widowed:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	2	4
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	19	42	61
With other disturbances of circulation.....	9	2	..	2
Senile	11	5	20	25
Involutional	12	..	5	5
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Psychoneuroses	16	2	5	7
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	1	8	9
Paranoia and paranoid conditions.....	19	..	1	1
Undiagnosed	22	..	1	1
Without mental disorder.....	23	3	7	10
Total.....		36	93	129*

**MARITAL STATUS OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued**

White Race

PSYCHOSES	Code No.	Men	Women	Total
Separated:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	2	2
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	4	..	4
Psychoneuroses	16	1	2	3
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	2	8	10
Without mental disorder.....	23	18	1	19
Total.....		27	14	41*
Divorced:				
Due to alcohol	5	1	..	1
With cerebral arteriosclerosis.....	8	4	2	6
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	..	1
Psychoneuroses	16	2	7	9
Manic-depressive	17	2	..	2
Dementia praecox (schizophrenia).....	18	4	4	8
Paranoia and paranoid conditions.....	19	2	1	3
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	22	3	25
Primary behavior disorders.....	24	..	2	2
Total.....		41	19	60*
Unascertained:				
With cerebral arteriosclerosis.....	8	1	1	2
Senile	11	..	1	1
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Psychoneuroses	16	1	2	3
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	1	..	1
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	2	2	4
Total.....		7	7	14*

**MARITAL STATUS OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Single:				
With syphilitic meningo-encephalitis (general paresis).....	1	8	1	9
Due to alcohol	5	2	..	2
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	6	2	8
With other disturbances of circulation.....	9	2	1	3
Due to convulsive disorder (epilepsy).....	10	9	2	11
Due to other metabolic, etc., diseases.....	13	1	1	2
Psychoneuroses	16	4	1	5
Manic-depressive	17	8	10	18
Dementia praecox (schizophrenia).....	18	46	19	65
Psychoses with mental deficiency.....	21	16	5	21
Undiagnosed	22	1	..	1
Without mental disorder.....	23	36	18	54
Total.....		140	60	200*
Married:				
With syphilitic meningo-encephalitis (general paresis).....	1	19	10	29
With other forms of syphilis of the central nervous system.....	2	1	..	1
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	9	..	9
Due to a drug or other exogenous poison.....	6	1	..	1
With cerebral arteriosclerosis.....	8	38	10	48
With other disturbances of circulation.....	9	3	3	6
Senile	11	9	3	12
Due to other metabolic, etc., diseases.....	13	..	1	1
Psychoneuroses	16	3	2	5
Manic-depressive	17	14	18	32
Dementia praecox (schizophrenia).....	18	23	39	62
Paranoia and paranoid conditions.....	19	1	..	1
With mental deficiency.....	21	1	5	6
Without mental disorder.....	23	11	2	13
Total.....		134	93	227*
Widowed:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With other forms of syphilis of the central nervous system.....	2	..	1	1
Due to alcohol	5	1	..	1
With cerebral arteriosclerosis.....	8	14	16	30
With other disturbances of circulation.....	9	2	..	2
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	6	9	15
Involuntal	12	..	1	1
Manic-depressive	17	1	2	3
Dementia praecox (schizophrenia).....	18	..	4	4
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	1	..	1
Total.....		28	34	62*
Separated:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
Without mental disorder.....	23	1	..	1
Total.....		2	..	2*

MARITAL STATUS OF FIRST ADMISSIONS CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Divorced:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	..	4
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	1	..	1
Due to trauma	7	..	1	1
With cerebral arteriosclerosis.....	8	3	6	9
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	..	4	4
Psychoneuroses	16	..	1	1
Manic-depressive	17	4	1	5
Dementia praecox (schizophrenia).....	18	9	20	29
With mental deficiency.....	21	2	..	2
Without mental disorder.....	23	3	1	4
Total.....		27	35	62*
Unascertained:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	1	4
Due to alcohol.....	5	..	1	1
With cerebral arteriosclerosis.....	8	5	..	5
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	2	..	2
Manic-depressive	17	3	3	6
Dementia praecox (schizophrenia).....	18	1	2	3
Without mental disorder.....	23	2	..	2
Total.....		17	7	24*

PSYCHOSES OF READMISSIONS

PSYCHOSES	Code No	White Men	White Women	Negro Men	Negro Women	Total
With syphilitic meningo-encephalitis (general paresis).....	100	3	..	3	1	7
Total.....		3	..	3	1	7*
With meningo-vascular syphilis.....	210	1	..	..	..	1
Total.....		1	..	..	..	1*
With epidemic encephalitis.....	300	2	2	..	..	4
Total.....		2	2	..	..	4*
Due to alcohol:						
Delirium tremens.....	520	7	..	..	..	7
Acute hallucinosis.....	540	..	1	2	..	3
Other types.....	550	1	..	..	..	1
Total.....		8	1	2	..	11*
Due to a drug or other exogenous poison:						
Opium or a derivative.....	630	1	..	..	..	1
Another drug.....	640	1	1	..	..	2
Total.....		2	1	..	..	3*
Mental deterioration due to trauma.....	730	1	..	..	..	1
Total.....		1	..	..	..	1*
With cerebral arteriosclerosis.....	800	7	15	7	3	32
Total.....		7	15	7	3	32*
With cardio-renal disease.....	920	4	..	..	..	4
Total.....		4	..	..	..	4*
Due to convulsive disorder (epilepsy):						
Deterioration.....	1010	7	2	2	..	11
Clouded states.....	1020	1	2	3	..	6
Other epileptic types.....	1030	..	..	..	1	1
Total.....		8	4	5	1	18*
Senile:						
Simple deterioration.....	1110	..	3	..	..	3
Total.....		..	3	..	..	3*
Involucional:						
Melancholia.....	1210	6	7	..	..	13
Paranoid.....	1220	..	1	..	..	1
Total.....		6	8	..	..	14*
Due to unknown or hereditary cause but associated with organic change—Huntington's chorea.....	1530	..	..	1	..	1
Total.....		..	..	1	..	1*
Psychoneuroses:						
Hysteria.....	1610	3	13	..	1	17
Psychasthenia or compulsive states.....	1620	1	2	..	..	3
Neurasthenia.....	1630	..	1	..	..	1
Hypochondriasis.....	1640	..	1	..	..	1
Reactive depression.....	1650	1	..	..	..	1
Anxiety state.....	1660	..	1	..	..	1
Mixed psychoneurosis.....	1680	1	2	..	..	3
Total.....		6	20	..	1	27*

PSYCHOSES OF READMISSIONS—Continued

PSYCHOSES	Code No.	White Men	White Women	Negro Men	Negro Women	Total
Manic-depressive:						
Manic	1710	26	23	10	27	86
Depressive	1720	18	7	..	1	26
Mixed	1740	2	..	..	1	3
Perplexed	1750	..	1	..	..	1
Total.....		46	31	10	29	116*
Dementia praecox (schizophrenia):						
Simple	1810	..	1	..	..	1
Hebephrenic	1820	6	6	3	6	21
Catatonic	1830	9	23	6	9	47
Paranoid	1840	5	17	2	3	27
Total.....		20	47	11	18	96*
Paranoia and paranoid conditions:						
Paranoia	1910	1	1	..	..	2
Paranoid conditions.....	1920	1	4	..	..	5
Total.....		2	5	..	..	7*
With psychopathic personality.....	2000	1	..	..	..	1
Total.....		1	..	..	..	1*
With mental deficiency.....	2100	5	3	2	1	11
Total		5	3	2	1	11*
Total with psychoses.....		122	140	41	54	357*
Without psychoses:						
Without mental disorder.....	2300	5	1	1	..	7
Epilepsy	2310	2	..	..	..	2
Alcoholism	2320	44	7	..	..	51
Drug addiction.....	2330	2	2	..	..	4
Mental deficiency.....	2340	2	1	1	2	6
Psychopathic personality.....	2360	7	3	1	..	11
Psychopathic personality with pathologic sexuality.....	2361	..	1	..	..	1
Psychopathic personality with pathologic emotionality....	2362	..	1	..	..	1
Psychopathic personality—mixed trends.....	2364	2	..	..	..	2
Total		64	16	3	2	85*
Total without psychoses.....		64	16	3	2	85*
GRAND TOTAL.....		186	156	44	56	442*

**DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
AND CONDITION ON DISCHARGE**

White Race

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	18	8	26
With other forms of syphilis of the central nervous system.....	2	1	..	1
With epidemic encephalitis.....	3	..	2	2
Due to alcohol	5	59	4	63
Due to a drug or other exogenous poison.....	6	6	8	14
Due to trauma	7	3	..	3
With cerebral arteriosclerosis.....	8	29	27	56
With other disturbances of circulation.....	9	6	1	7
Due to convulsive disorder (epilepsy).....	10	18	13	31
Senile	11	11	3	14
Involutional	12	20	46	66
Due to other metabolic, etc., diseases.....	13	2	1	3
Due to unknown or hereditary cause but associated with organic change	15	2	..	2
Psychoneuroses	16	43	102	145
Manic-depressive	17	61	84	145
Dementia praecox (schizophrenia).....	18	47	105	152
Paranoia and paranoid conditions.....	19	9	11	20
With psychopathic personality.....	20	4	2	6
With mental deficiency.....	21	11	7	18
Undiagnosed	22	4	1	5
Total with psychoses.....		354	425	779*
Recovered:				
Due to alcohol	5	10	2	12
Due to a drug or other exogenous poison.....	6	..	4	4
Psychoneuroses	16	1	1	2
With psychopathic personality.....	20	1	..	1
Total.....		12	7	19*
Improved:				
With syphilitic meningo-encephalitis (general paresis).....	1	18	8	26
With other forms of syphilis of the central nervous system.....	2	1	..	1
With epidemic encephalitis	3	..	2	2
Due to alcohol	5	49	2	51
Due to a drug or other exogenous poison.....	6	6	4	10
Due to trauma	7	3	..	3
With cerebral arteriosclerosis.....	8	22	24	46
With other disturbances of circulation.....	9	5	1	6
Due to convulsive disorder (epilepsy).....	10	16	11	27
Senile	11	2	2	4
Involutional	12	19	45	64
Due to other metabolic, etc., diseases.....	13	1	1	2
Due to unknown or hereditary cause but associated with organic change	15	2	..	2
Psychoneuroses	16	36	98	134
Manic-depressive	17	56	83	139
Dementia praecox (schizophrenia).....	18	41	94	135
Paranoia and paranoid conditions.....	19	8	10	18
With psychopathic personality.....	20	3	2	5
With mental deficiency.....	21	7	4	11
Undiagnosed	22	3	1	4
Total.....		298	392	690*

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
AND CONDITION ON DISCHARGE—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
Unimproved:				
With cerebral arteriosclerosis.....	8	7	3	10*
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	2	2	4
Senile	11	9	1	10
Involuntal	12	1	1	2
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses	16	6	3	9
Manic-depressive	17	5	1	6
Dementia praecox (schizophrenia).....	18	6	11	17
Paranoia and paranoid conditions.....	19	1	3	4
With mental deficiency.....	21	4	3	7
Undiagnosed	22	1	..	1
Total.....		44	26	70*
Total with psychoses.....		354	425	779*
Without Psychoses:				
Epilepsy		4	3	7
Alcoholism	158	17	9	175
Drug addiction.....	4	8	13	25
Psychopathic personality.....	27	8	35	43
Mental deficiency.....	17	14	31	45
All others.....	1	1	2	4
Without mental disorder.....	49	11	60	70
Total without psychoses.....		260	63	323*
GRAND TOTAL.....		614	488	1102*

DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
AND CONDITION ON DISCHARGE

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	21	11	32
With epidemic encephalitis.....	3	..	1	1
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	11	1	12
Due to a drug or other exogenous poison.....	6	1	..	1
Due to trauma	7	2	..	2
With cerebral arteriosclerosis.....	8	18	22	40
With other disturbances of circulation.....	9	3	..	3
Due to convulsive disorder (epilepsy).....	10	3	7	10
Senile	11	..	4	2
Involutional	12	..	2	2
Due to other metabolic, etc., diseases.....	13	..	1	1
Due to unknown or hereditary cause but associated with organic change	15	1	1	2
Psychoneuroses	16	3	1	4
Manic-depressive	17	41	61	102
Dementia praecox (schizophrenia).....	18	32	43	75
Paranoia and paranoid conditions.....	19	..	3	3
With mental deficiency.....	21	3	5	8
Undiagnosed	22	1	1	2
Total with psychoses.....		141	164	305*
Recovered:				
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	3	1	4
Due to a drug or other exogenous poison.....	6	1	..	1
Manic-depressive	17	2	2	4
Dementia praecox (schizophrenia).....	18	1	..	1
Total.....		8	3	11*
Improved:				
With syphilitic meningo-encephalitis (general paresis).....	1	20	10	30
With epidemic encephalitis.....	3	..	1	1
Due to alcohol	5	8	..	8
Due to trauma	7	2	..	2
With cerebral arteriosclerosis.....	8	18	21	39
With other disturbances of circulation.....	9	3	..	3
Due to convulsive disorder (epilepsy).....	10	3	7	10
Senile	11	..	2	2
Involutional	12	..	2	2
Due to unknown or hereditary cause but associated with organic change	15	1	1	2
Psychoneuroses	16	3	1	4
Manic-depressive	17	39	59	98
Dementia praecox (schizophrenia).....	18	29	35	64
Paranoia and paranoid conditions.....	19	..	2	2
With mental deficiency.....	21	3	5	8
Undiagnosed	22	1	1	2
Total.....		130	147	277*
Unimproved:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	1	2
With cerebral arteriosclerosis.....	8	..	1	1
Senile	11	..	2	2
Due to other metabolic, etc., diseases.....	13	..	1	1
Dementia praecox (schizophrenia).....	18	2	8	10
Paranoia and paranoid conditions.....	19	..	1	1
Total		3	14	17*
Total with psychoses.....		141	164	305*

**DISCHARGES OF PATIENTS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES
AND CONDITION ON DISCHARGE—Continued**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Without Psychoses:				
Epilepsy	1	..	1
Alcoholism	10	1	11
Psychopathic personality.....	..	4	..	4
Mental deficiency.....	..	13	7	20
Without mental disorder.....	..	18	1	19
Total without psychoses.....	..	46	9	55*
GRAND TOTAL.....	..	187	173	360*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

White Race

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	10	1	11
With other forms of syphilis of the central nervous system.....	2	1	..	1
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	2	..	2
Due to trauma	7	2	..	2
With cerebral arteriosclerosis.....	8	52	34	86
With other disturbances of circulation.....	9	9	2	11
Due to convulsive disorder (epilepsy).....	10	7	3	15
Senile	11	23	25	48
Involutional	12	..	3	3
Due to other metabolic, etc., diseases.....	13	1	1	2
Due to new growth.....	14	1	1	2
Due to unknown or hereditary cause but associated with organic change	15	2	4	6
Psychoneuroses	16	3	1	4
Manic-depressive	17	6	3	9
Dementia praecox (schizophrenia).....	18	10	17	27
Paranoia and paranoid conditions.....	19	3	1	4
With mental deficiency.....	21	5	..	5
Undiagnosed	22	..	1	1
Without mental disorder.....	23	2	3	5
Total.....		140	105	245*
CAUSE OF DEATH				
Tuberculosis	002	7	2	9
Tubercular meningitis.....	010	..	1	1
Syphilitic meningo-encephalitis.....	025	4	1	5
Intestinal parasites and malnutrition.....	1303	..	2	2
Neoplasms:				
Liver	156	..	1	1
Lung	163	..	1	1
Reticulum cell sarcoma.....	2000	..	1	1
Stomach	230	..	1	1
Mandible	238	..	1	1
Lower pelvic organs.....	239	..	1	1
Brain tumor, intracranial.....	3080	..	1	2
Prostate gland.....	610	1	..	1
Diabetes mellitus.....	260	1	..	1
Pernicious anemia.....	2900	..	2	2
Pick's disease-Alzheimer's disease.....	305	1	1	2
Epilepsy	3081	5	2	7
Exhaustion, mental.....	3183	4	..	4
Subarachnoid hemorrhage.....	330	..	2	2
Cerebral hemorrhage.....	331	3	7	10
Cerebral embolism and cerebral thrombosis.....	332	1	1	2
Cerebral arteriosclerosis.....	334	4	8	12
Huntington's chorea.....	3550	..	1	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis.....	4201	19	10	29
Myocarditis	4222	19	25	44
Acute cardiac dilatation also cardiac compensation.....	4343	..	1	1
Cardio vascular disease with hypertension.....	442	..	3	4
General arteriosclerosis.....	4500	57	19	76
Lobar pneumonia.....	490	3	..	3
Broncho pneumonia.....	491	..	2	2
Intestinal obstruction, volvulus.....	5703	..	1	1
Peritonitis, stomach.....	576	1	..	1
Gastric hemorrhage.....	7845	1	..	1
Dehydration and malnutrition.....	7880	..	1	1
Uremia	792	4	1	5
Accidental traumatism:				
Hip fracture.....	N 820	..	2	2
Femur fracture.....	N 821	..	1	1
Suffocation, mouth and nose pressed into mattress, epilepsy....	924	1	..	1
Heat stroke.....	931	1	1	2
Strangulation, hanging, suicide.....	974	..	1	1
Suicide, cutting wound, throat.....	977	1	..	1
Total.....		140	105	245*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES—Continued

White Race

CAUSE OF DEATH	Code No.	Men	Women	Total
Senile:				
Tuberculosis	002	..	1	1
Neoplasms:				
Liver	156	..	1	1
Lung	163	..	1	1
Lower pelvic organs	239	..	1	1
Prostate gland	610	1	..	1
Cerebral hemorrhage	331	1	2	3
Cerebral embolism and cerebral thrombosis	332	..	1	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis ..	4201	3	1	4
Myocarditis	4222	3	8	11
General arteriosclerosis	4500	12	6	18
Broncho pneumonia	491	..	1	1
Uremia	792	3	1	4
Hip fracture	820	..	1	1
Total		23	25	48*
Cerebral Arteriosclerosis:				
Tuberculosis	002	2	..	2
Neoplasms:				
Mandible	238	..	1	1
Subarachnoid hemorrhage	330	..	1	1
Cerebral hemorrhage	331	2	3	5
Cerebral embolism and cerebral thrombosis	332	1	..	1
Cerebral arteriosclerosis	334	3	7	10
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis ..	4201	7	3	10
Myocarditis	4222	4	7	11
Cardio vascular disease with hypertension	442	..	2	2
General arteriosclerosis	4500	32	9	41
Uremia	792	1	..	1
Hip fracture	820	..	1	1
Total		52	34	86*
Syphilitic Meningo Encephalitis:				
Syphilitic meningo encephalitis	025	3	1	4
Exhaustion, mental	3183	1	..	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis ..	4201	2	..	2
Myocarditis	4222	2	..	2
Lobar pneumonia	490	1	..	1
Heat stroke	981	1	..	1
Total		10	1	11*
Alcoholic:				
Exhaustion, mental	3183	1	..	1
Cerebral arteriosclerosis	334	1	..	1
Total		2	..	2*
Manic Depressive:				
Tuberculosis	002	1	..	1
Diabetes mellitus	260	1	..	1
Exhaustion, mental	3183	1	..	1
Coronary thrombosis, occlusion, embolism also cardiac thrombosis ..	4201	1	1	2
Myocarditis	4222	1	1	2
General arteriosclerosis	4500	1	..	1
Strangulation, hanging, suicide	974	..	1	1
Total		6	3	9*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES—Continued

White Race

CAUSE OF DEATH	Code No.	Men	Women	Total
Involuntional Psychoses:				
Cerebral arteriosclerosis.....	334	..	1	1
Cardio vascular disease with hypertension.....	442	..	1	1
Heat stroke.....	931	..	1	1
Total.....		..	3	3*
Dementia Praecox:				
Tuberculosis.....	002	2	1	3
Intestinal parasites and malnutrition.....	1303	..	2	2
Neoplasms:				
Reticulum cell sarcoma.....	2000	..	1	1
Stomach.....	230	..	1	1
Subarachnoid hemorrhage.....	330	..	1	1
Cerebral hemorrhage.....	331	..	2	2
Coronary thrombosis, occlusion, embolism also cardiac thrombosis...	4201	2	3	5
Myocarditis.....	4222	2	2	4
General arteriosclerosis.....	4500	3	2	5
Intestinal obstruction, volvulus.....	5703	..	1	1
Peritonitis, stomach.....	576	1	..	1
Femur fracture.....	821	..	1	1
Total.....		10	17	27*
Paranoia and Paranoid Conditions:				
Coronary thrombosis, occlusion, embolism also cardiac thrombosis..	4201	..	1	1
Myocarditis.....	4222	1	..	1
General arteriosclerosis.....	4500	1	..	1
Lobar pneumonia.....	490	1	..	1
Total.....		3	1	4*
Convulsive Disorders—Epilepsy:				
Tubercular meningitis.....	010	..	1	1
Pernicious anemia.....	2900	..	1	1
Epilepsy.....	3081	4	1	5
Exhaustion, mental.....	3183	1	..	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	..	1	1
Myocarditis.....	4222	..	3	3
Acute cardiac dilatation, also cardiac compensation.....	4343	..	1	1
General arteriosclerosis.....	4500	1	..	1
Suffocation, mouth and nose pressed into mattress.....	924	1	..	1
Total.....		7	8	15*
Psychoneuroses:				
Tuberculosis.....	002	1	..	1
Myocarditis.....	4222	1	..	1
General arteriosclerosis.....	4500	1	1	2
Total.....		3	1	4*
With Mental Deficiency:				
Tuberculosis.....	002	1	..	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	2	..	2
Myocarditis.....	4222	1	..	1
Gastric hemorrhage.....	7845	1	..	1
Total.....		5	..	5*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES—Continued

White Race

CAUSE OF DEATH	Code No.	Men	Women	Total
All Other Psychoses:				
Syphilitic meningo encephalitis.....	025	1	..	1
Pernicious anemia.....	2900	..	1	1
Pick's disease—Alzheimer's disease.....	305	1	1	2
Neoplasms:				
Brain tumor, intracranial.....	3080	1	1	2
Epilepsy.....	3081	1	1	2
Huntington's chorea.....	3550	..	1	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	2	..	2
Myocarditis.....	4222	4	4	8
Cardio vascular disease with hypertension.....	442	1	..	1
General arteriosclerosis.....	4500	6	1	7
Lobar pneumonia.....	490	1	..	1
Broncho pneumonia.....	491	..	1	1
Dehydration and malnutrition.....	7880	..	1	1
Suicide, cutting wound, throat.....	977	1	..	1
Total		19	12	31*
GRAND TOTAL.....		140	105	245*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
With syphilitic meningo-encephalitis (general paresis).....	1	20	4	24
With other forms of syphilis of the central nervous system.....	2	1	..	1
Due to alcohol.....	5	2	..	2
Due to trauma.....	7	2	..	2
With cerebral arteriosclerosis.....	8	36	20	56
With other disturbances of circulation.....	9	8	5	13
Due to convulsive disorder (epilepsy).....	10	3	4	7
Senile.....	11	11	8	19
Due to other metabolic, etc., diseases.....	13	..	2	2
Due to unknown or hereditary cause but associated with organic change.....	15	..	1	1
Manic depressive.....	17	5	12	17
Dementia praecox (schizophrenia).....	18	17	20	37
With mental deficiency.....	21	3	3	6
Undiagnosed.....	22	1	..	1
Without mental disorder.....	23	5	6	11
Total.....		113	85	198*
CAUSE OF DEATH				
Tuberculosis.....	002	12	15	27
Syphilitic meningo encephalitis.....	025	20	3	23
Syphilis.....	029	1	1	2
Encephalitis lethargica.....	082	1	..	1
Neoplasms:				
Epithelioma.....	191	1	..	1
Epilepsy.....	3081	6	3	9
Exhaustion, mental.....	3183	6	9	15
Subarachnoid hemorrhage.....	330	1	..	1
Cerebral hemorrhage.....	331	6	1	7
Cerebral embolism and cerebral thrombosis.....	332	1	2	3
Cerebral arteriosclerosis.....	334	6	4	10
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis.....	4201	10	1	11
Cardio vascular disease.....	4221	1	3	4
Myocarditis.....	4222	1	3	4
Acute cardiac dilatation, also cardiac compensation.....	4343	..	1	1
Cardio vascular disease with hypertension.....	442	10	5	15
General arteriosclerosis.....	4500	27	24	51
Pulmonary embolism.....	465	..	1	1
Lobar pneumonia.....	490	..	1	1
Pneumonia, type not specified.....	493	1	1	2
Pulmonary abscess.....	521	..	1	1
Diarrhea and enteritis—gastro enteritis.....	5711	..	3	3
Pyelonephritis.....	6000	1	..	1
Gastric hemorrhage.....	7845	..	1	1
Respiratory failure and circulatory collapse.....	7950	1	1	2
Strangulation, choked by another patient.....	983	..	1	1
Total.....		113	85	198*
Senile:				
Tuberculosis.....	002	1	..	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis.....	4201	1	1	2
Cardio vascular disease with hypertension.....	442	..	1	1
General arteriosclerosis.....	4500	8	6	14
Respiratory failure and circulatory collapse.....	7950	1	..	1
Total.....		11	8	19*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES—Continued
Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Cerebral Arteriosclerosis:				
Tuberculosis	002	..	2	2
Neoplasms:				
Epithelioma	191	1	..	1
Cerebral hemorrhage.....	331	5	..	5
Cerebral embolism and cerebral thrombosis.....	332	1	2	3
Cerebral arteriosclerosis.....	334	5	2	7
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	4	..	4
Cardio vascular disease with hypertension.....	442	5	2	7
General arteriosclerosis.....	4500	15	12	27
Total.....		36	20	56*
Syphilitic Meningo Encephalitis:				
Syphilitic meningo encephalitis.....	025	20	3	23
Strangulation, choked by another patient.....	983	..	1	1
Total.....		20	4	24*
Alcoholic:				
Tuberculosis	002	1	..	1
Total.....		1	..	1*
Manic Depressive:				
Tuberculosis	002	1	4	5
Exhaustion, mental.....	3183	1	5	6
Cerebral hemorrhage.....	331	1	..	1
Cerebral arteriosclerosis.....	334	..	1	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	1	..	1
Myocarditis	4222	..	1	1
General arteriosclerosis.....	4500	..	1	1
Pneumonia, type not specified.....	493	1	..	1
Total.....		5	12	17*
Dementia Praecox:				
Tuberculosis	002	7	7	14
Exhaustion, mental.....	3183	4	2	6
Subarachnoid hemorrhage.....	330	1	..	1
Cerebral hemorrhage.....	331	..	1	1
Cerebral arteriosclerosis.....	334	1	..	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	2	..	2
Cardio vascular disease.....	4221	..	2	2
Acute cardiac dilatation, also cardiac compensation.....	4343	..	1	1
Cardio vascular disease with hypertension.....	442	..	1	1
General arteriosclerosis.....	4500	1	3	4
Lobar pneumonia.....	490	..	1	1
Pneumonia, type not specified.....	493	..	1	1
Pyelonephritis	6000	1	..	1
Gastric hemorrhage.....	7845	..	1	1
Total.....		17	20	37*
Convulsive Disorders—Epilepsy:				
Epilepsy	3081	2	3	5
Cardio vascular disease.....	4221	1	..	1
Pulmonary embolism.....	465	..	1	1
Total.....		3	4	7*

DEATHS CLASSIFIED WITH REFERENCE TO PRINCIPAL PSYCHOSES—Continued

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
With Mental Deficiency:				
Epilepsy	3081	2	..	2
Exhaustion, mental.....	3183	..	1	1
Cardio vascular disease with hypertension.....	442	..	1	1
General arteriosclerosis.....	4500	1	1	2
Total.....		3	3	6*
All Other Psychoses:				
Tuberculosis	002	2	2	4
Syphilis	029	1	1	2
Encephalitis lethargica.....	082	1	..	1
Epilepsy	3081	2	..	2
Exhaustion, mental.....	3183	1	1	2
Cerebral arteriosclerosis.....	334	..	1	1
Coronary thrombosis, occlusion, embolism, also cardiac thrombosis..	4201	2	..	2
Cardio vascular disease.....	4221	..	1	1
Myocarditis	4222	1	2	3
Cardio vascular disease with hypertension.....	442	5	..	5
General arteriosclerosis.....	4500	2	1	3
Pulmonary abscess.....	521	..	1	1
Diarrhea and enteritis—gastro enteritis.....	5711	..	3	3
Respiratory failure and circulatory collapse.....	7950	..	1	1
Total		17	14	31*
GRAND TOTAL.....		113	85	198*

**AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

White Race

PSYCHOSES	Code No.	Men	Women	Total
25-29 Years:				
Due to alcohol	5	1	..	1
Due to convulsive disorder (epilepsy).....	10	2	..	2
With mental deficiency.....	21	1	..	1
Total.....		4	..	4*
30-34 Years:				
Due to convulsive disorder (epilepsy).....	10	1	..	1
Total.....		1	..	1*
35-39 Years:				
With cerebral arteriosclerosis.....	8	..	1	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	1	3	4
Total.....		2	6	8*
40-44 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	..	1	1
Due to convulsive disorder (epilepsy).....	10	1	2	3
Due to new growth.....	14	..	1	1
Dementia praecox (schizophrenia).....	18	1	..	1
With mental deficiency.....	21	2	..	2
Without mental disorder.....	23	..	1	1
Total.....		5	5	10*
45-49 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	2	1	3
With other disturbances of circulation.....	9	1	2	3
Due to convulsive disorder (epilepsy).....	10	..	1	1
Due to other metabolic, etc., diseases.....	13	..	1	1
Due to unknown or hereditary cause but associated with organic change	15	..	2	2
Psychoneuroses	16	1	..	1
Manic-depressive	17	2	..	2
Dementia praecox (schizophrenia).....	18	..	1	1
With mental deficiency.....	21	1	..	1
Total.....		8	8	16*
50-54 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With other forms of syphilis of the central nervous system.....	2	1	..	1
With cerebral arteriosclerosis.....	8	5	..	5
Due to convulsive disorder (epilepsy).....	10	1	2	3
Due to new growth.....	14	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Psychoneuroses	16	1	..	1
Manic-depressive	17	1	..	1
Dementia praecox (schizophrenia).....	18	3	1	4
Paranoia and paranoid conditions.....	19	1	..	1
Total.....		16	3	19*

**AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued**

White Race

PSYCHOSES	Code No.	Men	Women	Total
55-59 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	1	1
With other infectious diseases.....	4	1	..	1
Due to trauma.....	7	1	..	1
With cerebral arteriosclerosis.....	8	5	4	9
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	1	2
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Psychoneuroses	16	1	..	1
Dementia praecox (schizophrenia).....	18	..	3	3
Total.....		10	10	20*
60-64 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	..	3
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	9	5	14
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	..	1	1
Involutional	12	..	2	2
Due to unknown or hereditary cause but associated with organic change	15	1	..	1
Dementia praecox (schizophrenia).....	18	1	3	4
Paranoia and paranoid conditions.....	19	1	..	1
Undiagnosed	22	..	1	1
Total.....		16	13	29*
65-69 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	..	4
With cerebral arteriosclerosis.....	8	13	4	17
With other disturbances of circulation.....	9	3	..	3
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	1	..	1
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	..	2	2
Paranoia and paranoid conditions.....	19	1	1	2
Without mental disorder.....	23	1	1	2
Total.....		24	10	34*
70 Years and Over:				
Due to trauma.....	7	1	..	1
With cerebral arteriosclerosis.....	8	18	18	36
With other disturbances of circulation.....	9	4	..	4
Senile	11	22	24	46
Involutional	12	..	1	1
Due to other metabolic, etc., diseases.....	13	1	..	1
Psychoneuroses	16	..	1	1
Manic-depressive	17	2	1	3
Dementia praecox (schizophrenia).....	18	4	4	8
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	1	1	2
Total.....		54	50	104*
GRAND TOTAL.....		140	105	245*

**AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Under 15 Years:				
Without mental disorder.....	23	..	3	3
Total.....			3	3*
15-19 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
Dementia praecox (schizophrenia).....	18	1	..	1
Without mental disorder.....	23	1	1	2
Total.....		3	1	4*
20-24 Years:				
Due to trauma.....	7	1	..	1
Manic-depressive.....	17	1	..	1
Dementia praecox (schizophrenia).....	18	1	..	1
With mental deficiency.....	21	..	1	1
Without mental disorder.....	23	1	1	2
Total.....		4	2	6*
25-29 Years:				
Due to convulsive disorder (epilepsy).....	10	1	1	2
Manic-depressive.....	17	1	3	4
Dementia praecox (schizophrenia).....	18	2	3	5
With mental deficiency.....	21	2	..	2
Total.....		6	7	13*
30-34 Years:				
With syphilitic meningo-encephalitis.....	1	1	..	1
Due to trauma.....	7	1	..	1
Due to convulsive disorder (epilepsy).....	10	..	3	3
Due to other metabolic, etc., diseases.....	13	..	1	1
Manic-depressive.....	17	1	..	1
Dementia praecox (schizophrenia).....	18	1	2	3
Total.....		4	6	10*
35-39 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	1	2
Due to alcohol.....	5	1	..	1
Due to other metabolic, etc., diseases.....	13	..	1	1
Manic-depressive.....	17	..	1	1
Dementia praecox (schizophrenia).....	18	3	..	3
Undiagnosed.....	22	1	..	1
Without mental disorder.....	23	..	1	1
Total.....		6	4	10*
40-44 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	1	5
With cerebral arteriosclerosis.....	8	..	1	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Manic-depressive.....	17	1	2	3
Dementia praecox (schizophrenia).....	18	4	2	6
Without mental disorder.....	23	1	..	1
Total.....		11	6	17*

**AGE OF PATIENTS AT TIME OF DEATH CLASSIFIED WITH REFERENCE TO
PRINCIPAL PSYCHOSES—Continued**

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
45-49 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	..	3
With cerebral arteriosclerosis.....	8	3	2	5
Due to convulsive disorder (epilepsy).....	10	1	..	1
Manic-depressive	17	..	2	2
Dementia praecox (schizophrenia).....	18	3	3	6
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	1	..	1
Total.....		12	7	19*
50-54 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With cerebral arteriosclerosis.....	8	1	5	6
With other disturbances of circulation.....	9	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	1	2	3
Without mental disorder.....	23	1	..	1
Total.....		6	9	15*
55-59 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	1	3
With cerebral arteriosclerosis.....	8	2	4	6
With other disturbances of circulation.....	9	2	3	5
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	..	1	1
Total.....		7	10	17*
60-64 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	4	..	4
With cerebral arteriosclerosis.....	8	13	2	15
Senile	11	..	2	2
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	..	2	2
Total.....		17	7	24*
65-69 Years:				
With cerebral arteriosclerosis	8	6	3	9
With other disturbances of circulation.....	9	3	2	5
Senile	11	1	..	1
Dementia praecox (schizophrenia).....	18	..	3	3
With mental deficiency.....	21	..	1	1
Total.....		10	9	19*
70 years and Over:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	1	3
With other forms of syphilis of the central nervous system.....	2	1	..	1
With cerebral arteriosclerosis.....	8	11	3	14
With other disturbances of circulation.....	9	2	..	2
Senile	11	10	6	16
Manic-depressive	17	..	1	1
Dementia praecox (schizophrenia).....	18	1	2	3
With mental deficiency.....	21	..	1	1
Total.....		27	14	41*
GRAND TOTAL.....		113	85	198*

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL

White Race

PSYCHOSES	Code No.	Men	Women	Total
Less Than 1 Month:				
With syphilitic meningo-encephalitis (general paresis).....	1	..	1	1
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	9	8	17
With other disturbances of circulation.....	9	3	1	4
Senile.....	11	5	3	8
Manic-depressive.....	17	..	1	1
Without mental disorder.....	23	1	2	3
Total.....		19	16	35*
1-3 Months:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	13	3	16
With other disturbances of circulation.....	9	1	..	1
Senile.....	11	1	6	7
Involuntal.....	12	..	1	1
Due to unknown or hereditary cause but associated with organic change.....	15	..	1	1
Total.....		16	11	27*
4-7 Months:				
With cerebral arteriosclerosis.....	8	6	7	13
With other disturbances of circulation.....	9	1	1	2
Senile.....	11	4	7	11
Due to unknown or hereditary cause but associated with organic change.....	15	1	..	1
Total.....		12	15	27*
8-12 Months:				
With cerebral arteriosclerosis.....	8	4	6	10
With other disturbances of circulation.....	9	1	..	1
Senile.....	11	3	..	3
Due to new growth.....	14	..	1	1
Due to unknown or hereditary cause but associated with organic change.....	15	1	1	2
Psychoneuroses.....	16	1	..	1
Manic-depressive.....	17	1	..	1
Total.....		11	8	19*
1-2 Years:				
With syphilitic meningo-encephalitis.....	1	2	..	2
With other forms of syphilis of the central nervous system.....	2	1	..	1
With cerebral arteriosclerosis.....	8	5	4	9
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	3	..	3
Senile.....	11	6	3	9
Manic-depressive.....	17	1	..	1
With mental deficiency.....	21	2	..	2
Total.....		21	7	28*

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
3-4 Years:				
With other infectious diseases.....	4	1	..	1
Due to alcohol	5	1	..	1
Due to trauma	7	1	..	1
With cerebral arteriosclerosis.....	8	10	4	14
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	3	4
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Psychoneuroses	16	2	..	2
Dementia praecox (schizophrenia).....	18	..	2	2
Total.....		18	10	28*
5-6 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With cerebral arteriosclerosis.....	8	..	2	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Senile	11	1	2	3
Involuntal	12	..	1	1
Due to other metabolic, etc., diseases.....	13	1	..	1
Paranoia and paranoid conditions.....	19	1	1	2
With mental deficiency.....	21	1	..	1
Total.....		7	6	13*
7-8 Years:				
With cerebral arteriosclerosis.....	8	3	..	3
Senile	11	1	..	1
Paranoia and paranoid conditions.....	19	2	..	2
Total.....		6	..	6*
9-10 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
Due to trauma	7	1	..	1
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	1	..	1
Involuntal	12	..	1	1
Manic-depressive	17	1	..	1
Dementia praecox (schizophrenia).....	18	1	1	2
Undiagnosed	22	..	1	1
Total.....		5	4	9*
11-12 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With mental deficiency.....	21	2	..	2
Without mental disorder.....	23	1	..	1
Total.....		5	..	5*
13-14 Years:				
Senile	11	..	1	1
Manic-depressive	17	1	..	1
Dementia praecox (schizophrenia).....	18	..	1	1
Total.....		1	2	3*

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL—Continued

White Race

PSYCHOSES	Code No.	Men	Women	Total
15-19 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	2	..	2
Due to convulsive disorder (epilepsy).....	10	1	..	1
Due to new growth.....	14	1	..	1
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Dementia praecox (schizophrenia).....	18	2	3	5
Total.....		7	4	11*
20 Years and Over:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With other disturbances of circulation.....	9	1	..	1
Due to convulsive disorder (epilepsy).....	10	1	7	8
Due to other metabolic, etc., diseases.....	13	..	1	1
Psychoneuroses	16	..	1	1
Manic-depressive	17	..	2	2
Dementia praecox (schizophrenia).....	18	7	10	17
Without mental disorder.....	23	..	1	1
Total		12	22	34*
GRAND TOTAL.....		140	105	245*

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
Less Than 1 Month:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	..	3
With cerebral arteriosclerosis.....	8	6	1	7
With other disturbances of circulation.....	9	4	1	5
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	3	1	4
Manic-depressive	17	1	2	3
Dementia praecox (schizophrenia).....	18	1	..	1
Total.....		18	6	24*
1-3 Months:				
With syphilitic meningo-encephalitis (general paresis).....	1	5	2	7
With cerebral arteriosclerosis.....	8	9	4	13
With other disturbances of circulation.....	9	3	..	3
Senile	11	3	1	4
Due to other metabolic, etc., diseases.....	13	..	1	1
Dementia praecox (schizophrenia).....	18	2	..	2
Total.....		22	8	30*
4-7 Months:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	1	4
With cerebral arteriosclerosis.....	8	5	1	6
Due to convulsive disorder (epilepsy).....	10	..	1	1
Senile	11	1	3	4
Due to other metabolic, etc., diseases.....	13	..	1	1
Due to unknown or hereditary cause but associated with organic change	15	..	1	1
Manic-depressive	17	1	1	2
With mental deficiency.....	21	1	..	1
Without mental disorder.....	23	..	3	3
Total.....		11	12	23*
8-12 Months:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	..	3
With cerebral arteriosclerosis.....	8	7	2	9
Senile	11	1	..	1
Total.....		11	2	13*
1-2 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	3	1	4
Due to alcohol.....	5	1	..	1
With cerebral arteriosclerosis.....	8	5	7	12
Due to convulsive disorder (epilepsy).....	10	1	2	3
Senile	11	2	2	4
Manic-depressive	17	1	1	2
Dementia praecox (schizophrenia).....	18	5	4	9
With mental deficiency.....	21	1	1	2
Total.....		19	18	37*
3-4 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	1	..	1
With cerebral arteriosclerosis.....	8	1	2	3
With other disturbances of circulation.....	9	..	1	1
Manic-depressive	17	..	3	3
Dementia praecox (schizophrenia).....	18	2	1	3
Without mental disorder.....	23	1	1	2
Total.....		5	8	13*

TOTAL DURATION OF HOSPITAL LIFE OF PATIENTS DYING IN HOSPITAL—Continued

Negro Race

PSYCHOSES	Code No.	Men	Women	Total
5-6 Years:				
Due to trauma.....	7	1	..	1
With cerebral arteriosclerosis.....	8	..	2	2
Senile	11	..	1	1
Manic-depressive	17	..	2	2
Dementia praecox (schizophrenia).....	18	1	2	3
Without mental disorder.....	23	..	1	1
Total.....		2	8	10*
7-8 Years:				
Due to trauma.....	7	1	..	1
Dementia praecox (schizophrenia).....	18	..	1	1
Without mental disorder.....	23	1	..	1
Total.....		2	1	3*
9-10 Years:				
With other disturbances of circulation.....	9	..	1	1
Manic-depressive	17	..	1	1
Undiagnosed	22	1	..	1
Without mental disorder.....	23	1	..	1
Total.....		2	2	4*
11-12 Years:				
With syphilitic meningo-encephalitis (general paresis).....	1	2	..	2
With other forms of syphilis of the central nervous system.....	2	1	..	1
With other disturbances of circulation.....	9	1	..	1
Dementia praecox (schizophrenia).....	18	..	1	1
Total.....		4	1	5*
13-14 Years:				
With other disturbances of circulation.....	9	..	1	1
Dementia praecox (schizophrenia).....	18	1	..	1
Without mental disorder.....	23	1	..	1
Total.....		2	1	3*
15-19 Years:				
With cerebral arteriosclerosis.....	8	3	..	3
With other disturbances of circulation.....	9	..	1	1
Senile	11	1	..	1
Manic-depressive	17	1	..	1
Dementia praecox (schizophrenia).....	18	1	3	4
Total.....		6	4	10*
20 Years and Over:				
With cerebral arteriosclerosis.....	8	..	1	1
Due to convulsive disorder (epilepsy).....	10	2	..	2
Manic-depressive	17	1	2	3
Dementia praecox (schizophrenia).....	18	4	8	12
With mental deficiency.....	21	1	2	3
Without mental disorder.....	23	1	1	2
Total.....		9	14	23*
GRAND TOTAL.....		113	85	198*

LABORATORY OF TROPICAL DISEASES

ANNUAL REPORT 1949-1950

Dr. C. C. Odom, Superintendent
South Carolina State Hospital
Columbia, South Carolina

Dear Dr. Odom:

I have the honor to present the annual report of the Laboratory of Tropical Diseases, National Institutes of Health, U. S. Public Health Service in conjunction with the S. C. State Hospital for the year ending June 30, 1950.

Administratively, the Laboratory was enlarged as of June 15, 1950, as a result of being designated as the headquarters of the Section on Epidemiology, of the Laboratory of Tropical Diseases. As the headquarters for the Section on Epidemiology, research work is planned and supervised not only for the local laboratory but also for branch laboratories located at the Milledgeville State Hospital, Milledgeville, Ga.; the University of Tennessee Medical School, Memphis, Tenn.; and the Federal Correctional Institution, Seagoville, Texas.

The moving of the headquarters to Columbia was made possible by the kindness of the S. C. State Hospital in making available space to house the additional personnel required to carry out the increased activities.

The scope of the investigational work has been enlarged to include research on many of the parasitic diseases, as well as continuing the work on malaria.

We have been honored during the year by many visiting scientists and health workers who were interested in research on tropical diseases. The length of the visits varied according to interests, ranging from one day to 3 months. Many of the visitors were on World Health Organization fellowships. In addition to domestic scientists, visitors were from the following countries: India, Phillipines, Liberia, China, Egypt, and England.

The laboratory continues to act as a national center for the distribution of therapeutic strains of malaria to treat neurosyphilis. During the year, 343 inocula were shipped to hospitals and physicians requesting this service. In addition, information was supplied on the use of malaria in the treatment of neurosyphilis.

SUMMARY OF RESEARCH

Cytological study of trypanosomes. Nuclear divisions were studied in *Trypanosoma lewisi* and *T. gambiense* on preparations from peripheral blood and internal organs. The achromatic figure in both species is associated with centrioles. The spindle is broad during anaphase, becoming narrower as the daughter nuclei move apart. At late telophase only the daughter centrioles and a connecting strand remain. There is evidence that the kinetoplast is neither structurally nor functionally connected with the formation of the achromatic figure. The chromosome number in *T. lewisi* is three in forms from the vertebrate host. Division of the nucleus follows the general pattern of other organisms.

Relative susceptibility of mosquito strains to malaria strains. The South Pacific (Chesson) strain of *Plasmodium vivax* continued to show a much higher infectivity to *Anopheles quadrimaculatus* than to either a Florida Keys or a Panama strain of *A. albimanus*; the latter strains were only slightly susceptible to infection.

However, another strain of *P. vivax* (Donaldson) presumably originating in the Philippine Islands infects the two strains of *A. albimanus* about as well as it does *A. quadrimaculatus*. However, this strain does not infect *A. quadrimaculatus* as well as does Chesson *vivax*. The work continues to support the theory that different strains of malaria vary in their ability to infect a particular species of mosquito.

Infectivity of early malaria parasitemias to mosquitoes. Each of 18 patients with primary *P. vivax* (Chesson strain) infected mosquitoes from 1 to 4 days (av. 2.0 days) before gametocytes were demonstrable by normal examination of 0.1 ccm of blood. The averages of the various phases were: first appearance of asexual parasites, 11.8 days; first appearance of gametocytes, 18.1 days; first infected mosquitoes, 16.1 days.

The infectivity of avian malaras to anopheline mosquitoes. *Plasmodium relictum*, a common parasite of wild birds, was infective to *Anopheles quadrimaculatus*, as well as to *Culex pipiens*. Complete development occurred in *A. quadrimaculatus*.

The Donaldson strain of Plasmodium vivax. This is an infection originating presumably in the Philippine Islands and obtained from a returned veteran during a relapse. It shows several

unusual characteristics which differ from typical *P. vivax*: 1. It is infective to negroes as well as to white patients; 2. The primary infection runs a mild and relatively short course, particularly in negroes. There is a greater tendency for self-termination; 3. There seems to be no cross-immunity between this strain and Chesson *vivax*; 4. Certain morphological characteristics are suggestive of *P. ovale*; the number of merozoites in mature segmenters range from 4 to 18, with the median of 8; 5. Gametocyte densities are usually low.

Effects of suppressive paludrine upon Plasmodium falciparum infectivity to mosquitoes. Weekly suppressive doses of 100 mgm of paludrine, as recommended by some malariologists, did not prevent the infection from developing in exposed mosquitoes. After receiving the drug, the malaria in the patient usually became non-infective to mosquitoes for 3 to 5 days. This shows that such suppressive dosages of paludrine will not protect the community against transmission of malaria.

Development of drug resistance in Plasmodium falciparum. Using the suppressive dosages of 100 mgm of paludrine, apparent drug resistance has been observed in *P. falciparum*. In one case, after numerous 100 mgm doses, and several 200 mgm doses, 400 mgm failed to clear the blood stream of asexual parasites.

Previous work by others has demonstrated development of drug resistance by the initial use of very small doses of paludrine. The present work shows that such may occur when used in the dosages that some recommend for suppression in the field.

Effect of antibiotics upon Plasmodium malariae. Aureomycin used against *P. malariae* is not a good antimalarial drug but does show some action, of a delayed nature, against the parasites. A single trial of terramycin shows a similar response.

The treatment of P. malariae with intramuscular chloroquine. A single injection of 450 mgm of chloroquine hydrochloride gave a clinical and parasitological response similar to that obtained by the 1.5 grain regime given orally when used in patients with *P. malariae* infections.

PAPERS PUBLISHED

1949—

Coatney, G. Robert; Cooper, W. Clark; Ruhe, David S., and Young, Martin D.

"Studies in Human Malaria: XVII. Trials of Quinacrine, Colchicine (SN 12,080) and Quinine against Chesson strain *vivax* malaria." Amer. Jour. Hyg. 50(2):194-199. September.

Young, Martin D.; and Eyles, Don E.

"Parasites resembling *Plasmodium ovale* in strains of *Plasmodium vivax*." Jour. Nat. Mal. Soc. 8(3):219-223. September.

Young, Martin D., and Johnson, Thomas H., Jr.

"A Malaria Survey of Liberia." Jour. Nat. Mal. Soc. 8(4):247-266. December.

1950—

Young, Martin D.

"Attempts to transmit human *Balantidium coli*." Amer. Jour. Trop. Medi. 30(1):71. January.

Coatney, G. Robert; Cooper, W. Clark; Ruhe, David S.; Young, Martin D., and Burgess, Robert W.

"Studies in Human Malaria: XVIII. The life pattern of sporozoite-induced St. Elizabeth strain *vivax* malaria." Amer. Jour. Hyg. 51(2):200-215. March.

Burgess, Robert W.

"Colonization of *Anopheles albimanus* from the Florida Keys." Jour. Economic Entom. 43(1):108. April.

Hunninen, Arne V., and Young, Martin D.

"Blood protozoa of birds at Columbia, South Carolina." Jour. Parasit. 36(3):258-260. June.

Hunninen, Arne V.; Young, Martin D., and Burgess, Robert W.

"The infection of anopheline mosquitoes by native avian malaria." Jour. Nat. Mal. Soc. 9(2):145-150. June.

Cooper, W. Clark; Coatney, G. Robert; Culwell, W. B. Eyles, Don E., and Young, Martin D.

"Studies in Human Malaria: XXVI. Simultaneous infection with the Chesson and the St. Elizabeth strains of *Plasmodium vivax*." Jour. Nat. Mal. Soc. 9(2):182-190. June.

In addition to the Director, the members of the staff are: Dr. Robert W. Burgess, entomologist; Dr. Gordon B. Wolcott, cytologist; Miss Aimee Wilcox, protozoologist; Mr. William M. May, parasitologist (medical); Mrs. Julia S. Cole, Jr., medical technician (parasitology); Mrs. Margaret F. Durham, medical technician (parasitology); Miss Helen C. Russell and Mr. Jimmie C. Skinner, medical biology technicians; Miss Mary H. Loudon, statistical clerk; Miss Ada P. Hall, procurement clerk; Mrs. Mary N. Schwinn, secretary; Miss N. Irene Neal, stenographer; and John Sharper, laboratory animal caretaker.

Dr. Arne V. Hunninen, of Mt. Union College, Alliance, Ohio, was a visiting investigator during the summer of 1949.

Respectfully submitted

MARTIN D. YOUNG

Director.

MDY:in

DEPARTMENT OF MENTAL HYGIENE

PERSONNEL

Cleve C. Odom, M.D._____State Mental Health Authority
 Mattie DeV. Ford_____Personnel Secretary
 *Iverson O. Brownell, M.D.____Psychiatrist, Greenville, S. C.

Charleston Clinic

Olin B. Chamberlain, M.D._____Director
 James Jennings Cleckley, M.D. Psychiatrist
 Margaret W. Guerard_____Chief Psychiatric Social Worker
 Elizabeth Bonnoitt_____Psychiatric Social Worker
 *Frances M. Reves_____Mental Hygiene Case Worker
 Nathalie Gray_____Psychometrist
 *Esther D. Gregorie Gray_____Electroencephalograph Technician
 Harriet Stevens_____Secretary-Receptionist
 *Lorraine H. Kendrick_____Clerk

Spartanburg Clinic

*Samuel R. Kilgore, M.D._____Psychiatrist
 Martha W. Herring_____Psychologist
 Kate S. Bumstead_____Chief Psychiatric Social Worker
 Marjorie Arnold_____Psychiatric Social Worker II
 Vardell F. Harrell_____Secretary-Receptionist
 Sarah S. Turner_____Clerk

*Part-time

REPORT OF THE DEPARTMENT OF MENTAL HYGIENE

*To the Board of Regents of the South Carolina State Hospital,
Columbia, South Carolina:*

Gentlemen:

I have the honor to submit the annual report of the Department of Mental Hygiene, South Carolina State Hospital, for the fiscal year ending June 30, 1950:

The mental health program in the State of South Carolina has made much progress during the past year. The major progress has been in the field of education through the libraries of films, books and pamphlets. The film library has been greatly enlarged and books have been purchased with which to begin a lending library for the professional public in South Carolina. The books are varied, including technical books on psychiatry, and psychology and books for the lay-public on child growth and development and marriage and the family. These books will be available to the general public on a loan basis. Pamphlets have been purchased covering all phases of child growth and development, problems of teachers and pupils and other related subjects. These pamphlets are to be distributed free of charge to the public.

The department is continuing to train personnel for employment in the clinics. During the year one of the trainees began work in the Spartanburg Mental Hygiene Clinic as psychologist. One trainee in psychiatric social work decided to continue work in a well-established clinic where she received training instead of returning to South Carolina. There is one person training for clinical psychologist and there are two training for psychiatric social work under the auspices of the department. An additional trainee in clinical psychology will be given the opportunity to enter academic training in the fall of 1950.

The Charleston clinic is continuing to operate on a full-time basis with full-time personnel. The Spartanburg clinic is continuing to operate on a part-time basis as Dr. S. R. Kilgore replaced Dr. John M. Pratt who resigned July 1, 1949. Dr. Kilgore assumed directorship of the clinic August 1, 1949. Mrs. Martha W. Herring, who was trained under our training pro-

gram, began work in the Spartanburg clinic as psychologist effective September 15, 1949. In April, 1950, a clerk was employed in the Spartanburg clinic and in May, 1950, a psychiatric social worker was employed.

In November, 1949, Dr. Iverson O. Brownell was employed by the department on a consultative basis in Greenville, South Carolina. Dr. Brownell agreed to take cases referred by the health and welfare departments and to render whatever service possible until a clinic could be established.

The following statistical material indicates to some extent the work done in the clinics during the year.

APPLICATIONS BY THE MONTH

1949-50

	Charleston Clinic	Spartanburg Clinic
July	38	1
August	66	12
September	51	14
October	60	5
November	38	20
December	30	7
January	63	6
February	64	7
March	64	12
April	44	5
May	54	7
June	52	7
Total	624	103

SOURCES OF REFERRAL

1949-50

	Charleston Clinic	Spartanburg Clinic
Physicians	258	28
Department of Public Welfare.....	103	12
Schools	63	3
Parents, Relatives, Guardians, Self.....	27	39
Courts	34	8
Family Welfare Agency.....	15	1
Department of Public Health.....	15	2
Others	109	10
Total.....	624	103

Respectfully submitted

CLEVE C. ODOM, M.D.

State Mental Health Authority.